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Figures Show A High Mortality Among Africans

WASHINGTON, March 2.—Much has been written about the effect of civilization upon the physical condition of primitive peoples. New evidence on this subject is presented in the December issue of "Public Health," the official organ of the Society of Medical Officers of Health (Great Britain), which quotes from the "Medical Journal of South Africa," a report of an examination of the teeth of a large group of Bantu children living in the Kraal native villages in the Transvaal. A careful examination of 6,179 children of school age living in more or less primitive surroundings showed that less than 20 per cent were free from dental defects. The investigation indicated that there is no great difference between the present-day European child and the pure aboriginal child as regards the incidence of cares in the primary teeth ;a slight difference appears in the permanent teeth, the difference being in favor of the aboriginal.

Fully 45 per cent of these South African native children had at least mild physical defects, due chiefly to malnutrition. The physician who made the examinations considers that the pre-supposition that aboriginal children are less prone to the so-called diseases of civilization rests upon insufficient data.

PHYSICAL DEFECTS OF AFRICAN CHILDREN

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Alabama

INCREASING LONGEVITY

Dr. Roy Schaffer, educator, brings out an interesting point in a lecture on lengthening the span of human life. He says we should live almost 150 years. He arrives at that figure by multiplying the number of years in man's period of growth by seven, which he says, is the rule for animal life.

"In the educational or social field," says Dr. Schaffer, "we have biological engineers just as other fields have engineers, and they deal strictly with life. One of their laws is very interesting, and that is that for animals the span of life is seven times the period of growth." Thus, he explains, the life of a horse is twenty-eight years, seven times the period of growth, and that of a chicken, forty-nine months, seven times the period required for maturity.

"Man matures in twenty-one years, and seven times this number means that you and I are entitled to live nearly 150 years," says Dr. Schaffer. "We should live that long. Why don't we?"

The average life of the Romans, he says, was eighteen years. This "meant some neglect from the time of birth to death." The average span of life in America in 1800 was thirty-two years, and in 1900 forty-five years. Today it is almost sixty years. "In a little over a century we have almost doubled the expectation of life by taking proper care of our children," says Dr. Schaffer.

Better care of children has been one factor in lengthening the average span of life. The chief factors, however, have probably been the progress of medical science in combatting disease and the widespread activities of public health workers. What public health departments, Federal, State and local, have done and are doing today to add to our years of life is doubtless not fully appreciated by the generality of people.

As for the view that man's span of life should be around 150 years, on the theory that human beings, like many animals, should live seven times as long as it takes them to reach maturity, we have no way of knowing whether or not it is sound. At any rate, it is interesting, and perhaps plausible.

But whether or not it is possible to extend the span of human life to 150 years, it is certainly within the realm of possibility to add many more years to the present average longevity, and it is altogether probable that by the end of this century people will be living much longer, on the average, than they do today. It is a fact that the average span has been almost doubled in this country within a century and a quarter. Perhaps within the next hundred years it will be almost doubled again.

Medical science has conquered many diseases that in the past shortened the average span of life. Just now effective warfare is being waged on tuberculosis, and it is predicted by some authorities that within the next decade or two the disease will be virtually eliminated from this country. When that is done, the average longevity will be increased by several years. The disease which medical science must conquer next is cancer, which now causes the death of more than one in every ten adults in this country. One man in every eight between the ages of 55 and 70 dies of cancer, and one woman in every five between the ages of 45 and 65.

If cancer could be controlled, it may readily be seen how the average span of human life would be increased by years thereby.

THREE COUNTIES IN HEALTH UNIT PLAN

Wilcox, DeKalb And Washington Latest To Make Appropriation For Work

Three Alabama counties, Wilcox, DeKalb and Washington, which previously had no organized public health work, have made appropriations for county health units, which will be installed Jan. 1, or shortly thereafter, it was announced yesterday at the State Health Department. With them Alabama will have 27 organized counties.

The organization of these counties, which is in line with the plan of the State Board of Health to make Alabama's rural health work 100 per cent efficient, will bring 73,785 additional Alabamians under public health protection, a number sufficient to raise Alabama's standard to the highest of all the states. Alabama's present rating is 57.48 per cent, second only to Ohio, whose rating, at the last report, is 59.67 per cent. The population of the three new counties is more than double the number needed to bring this state's rating up to that of Ohio.

In order to facilitate the training of county health officers, nurses and sanitary inspectors, a training station has been established at Wetumpka, under the direction of Dr. A. H. Graham, of the State Health Department. Two new health officers, Dr. O. L. Chason, of Chatham, who has been appointed health officer for Washington County and Dr. V. M. Roberts, of Blacksberg, S. C., unassigned, reported there for training Monday.

Four nurses, Miss Tommis Tyson, of Opp; Miss Jimmer Phillips, of LaGrange, Ga.; Mrs. Rawls Hatcliff, of Mobile and Mrs. Thelma Pasley, of Verbena, are also being trained at Wetumpka.

CHARGES GEORGIA— NEGLECTS HEALTH

Startling figures tending to show neglect of the state in providing sufficient funds to care for the tuberculosis sanatorium at Alto were revealed Monday by Dr. T. E. Abercrombie, state health officer in charge of the department of public health.

The sum of $500,000 last year was appropriated for the purpose of enlarging and modernizing the Alto sanitorium, the money to be derived from part of the state tobacco tax. This work has been completed and the plant at Alto is in splendid condition, the report shows. However, no money has been appropriated to care for the increased maintenance expense of the enlarged building and for that reason the department of public health cannot put the new facilities for the care of tuberculosis into operation. The new building, according to Dr. Abercrombie, is standing unoccupied and the department has a long waiting list of persons suffering from tuberculosis asking for admission for treatment.

Dr. Abercrombie declared that "the sanitorium now has a total of 240 available beds, 150 for white patients and 90 for negroes, but the present $100,000 annual maintenance appropriation will only provide for a maximum of 100 patients. There were in the institution, and on the waiting list, on March 24, 1927, 204 white patients, 54 more than the present bed capacity for whites and 104 more than the present total appropriation will care for."

There is much suffering in the state among the negroes on account of tuberculosis, but at present the state sanitorium cannot care for any of them through lack of money. It is the plan to put the white patients in the new building and turn the old one over to negroes as soon as funds can be obtained. It is estimated that the lowest amount at which both the white and colored divisions can be run at full capacity is $210,000 annually. The legislature will be asked for that amount this summer. This is a raise of $110,000 over the present fund.

Further attention was called to the very small amount that Georgia annually spends on public health work. A table of yearly per capita expenditures in Georgia was pointed out, which illustrates the extent to which the department is being starved. The per capita expenditures for various purposes are as follows: Highways, $30; education, $10.62; police protection, $3.66; fire protection, $2.57; charities and hospitals, $2.08; amusements, 88 cents, and public health, 3 cents. Against this 3 cents that Georgia gives for public health, Florida gives 20 cents, North Carolina 15 cents, South Carolina 8 cents, Alabama 8 cents and Tennessee 5 cents.

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NEGROES MAKE GIFT TO TUBERCULOSIS FUND

Donation Of $5 Received From Dexter Avenue Baptist Church.

The Montgomery Anti-Tuberculosis league has received a gift of $5 from the brotherhood of the Dexter Avenue Baptist church, colored. The donation of the work being done for negro patients at the fresh air camp. Appreciation of the gift has been expressed by league officials.

DR. BOWMAN GIVES AID IN NEGRO HEALTH WEEK

Makes Talk In Douglasville Section: Examinations Made

Health talks were delivered Saturday by Dr. J. A. Bowman, county health officer, to the negroes living at Douglasville, a suburban section of West Montgomery, in cooperation with national negro health week movement.

Almost without exception the children were found to be in need of medical treatment. Charlie Thomas made the highest score and was presented a Booker T. Washington memorial spoon. Examinations were made by Dr. C. Carr.

Following Dr. Bowman's talk the negroes pledged themselves to keep the premises in a better health condition, and immediately moved 10 wagon loads of garbage. The mothers were instructed in infant care, and general health rules. The clinics will continue throughout the summer under the promotion of the home demonstration agents, and public health nurses, and the county supervisor.

GIVES $10,000 TO JIM CROW SANITARIUM

MOBILE, Ala., March 7.—(By the Associated Negro Press). An offer of $10,000 has been made to be used as a unit for Negro patients has been made to the Mobile County Tuberculosis Association by Sol Kahn of Mobile on condition that the city assume the upkeep. Mr. Kahn's offer represents a gift of $10,000. The sanitarium at Mobile is located just outside the city on what is known as Capitol Hill.

70 YEAR LIFE SPAN 50 YEARS FROM NOW

Former Department of Agriculture Man Makes Prophecy at Tuskegee Institute

TUSKEGEE INSTITUTE, ALA., March 12.—Special to The Advertiser.—Dr. Harvey W. Wiley, formerly of the U. S. department of agriculture and sponsor of the pure food and drug laws, believes that within the course of a century the average span of life will be extended from the present 55 years to the three score and ten indicated by the Bible as the ideal life span. This is his prophecy as expressed in an address here Friday before the student body.

It is the duty of the educated person to live longer than the illiterate. Dr. Wiley stated, not only because he should know how to live better but because his obligation to society is greater and will take longer to fulfill. Dr. Wiley lamented the premature death of many men rendering valuable service. He pointed to the late Booker T. Washington, founder of Tuskegee institute, as an example of a man called away in the prime of life.

Speaking of the negro's seemingly excessive susceptibility to tuberculosis, Dr. Wiley declared that there is no reason why the negro should not attain the same degree of immunization from that disease that the whites have. Living out of doors winter and summer he urged as a means of combating tuberculosis.

Dr. Wiley was accompanied by Dr. B. B. Ross, state chemist, and H. D. Jones of the faculty of the Alabama Polytechnic institute at Auburn

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NEGRO HEALTH CONDITION IS A NATIONAL RATHER THAN RACIAL QUESTION

QUITE 150 outstanding physicians of the Negro race from all parts of the country attended the recent annual meeting of the John A. Andrew Clinical Society, which is part of the Tuskegee Institute, and they quite unanimously agreed that the health of the Negro people is National rather than a racial question, and the readers of The Negro World will agree with them. Disease draws no color line and establishes no color bars; it visits the rich and the poor, the high and the low, as the case may be. And this is as true of endemic as of epidemic diseases. Disease is disease, however it is differentiated. The main thing about it is that it is no respecter of race or color. Like a prairie fire it eats up everything in its way. Those who are affected by it, therefore, are wise when they regard and treat disease as a common enemy, to be met and combatted as such. Dr. Agernor B. Jackson, President of the Clinic and Director of the Department of Public Health of Howard University, at Washington, stated the views of the members, which will find general acceptance, in the following:

"Public health must always remain the business of National, State and Municipal Government and the officials chosen to carry out their laws. However desirous and anxious voluntary organizations and groups may be to put into operation a large health program, they can get but slight success without demanding and obtaining a scientific yet heart interest from those public officials chosen by authority to do the job.

"No one will rejoice more than myself if some one will prove my next statement is incorrect. I do not believe that there is in all America a State, county, city or town which is doing its full or even its half duty in attempting to relieve the health conditions among its colored citizens.

"This policy of neglect and indifference is unscientific, inhuman, unsound, unsanitary and un-American. Yet it exists everywhere because no large movement by Negroes has endured and persisted long enough to humanize their activities and set the machinery to work. The addition of trained Negro personnel to health departments will do much to solve this problem."

Every member of the Universal Negro Improvement Association is vitally concerned about this question of health, which depends so largely on proper housing, sanitation and clinical control and regulation, because Negroes everywhere live in segregated districts, for the most part, in all of the large cities, and are discriminated against by the city fathers in the matters of paving, lighting and water, for the streets as well as for the housings. We have been startled and appalled at the ruinous conditions of health that prevail in many large cities, especially in the South, and the attitude of the city fathers, who appeared to assume that the health conditions of the Negro was none of their business, when as a matter of course it should be their first business, as diseases of all sorts, as germinate in and are distributed always from the slum districts of cities and towns, whether the dwellers of them are of the black or the white race.

It is fortunate for the Negro people that they are developing in the life of the Negro people, and it should grow every year a strong body of physicians, who have much race pride and public with the constant work of local medical associations of our own spirit, and are beginning to exercise a large and helpful influence for its main support and encouragement. After all, there is no help in securing for the race better living conditions that make for like self-help. If we show no disposition to help ourselves others health in every large community, and they are gaining the sympathy will not be called upon to help us. And no man, no group of people and support of white physicians and those who have the administration of public affairs. Health Week has become an established

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HEALTH DIVISION NEEDS $1,898,492 WELCH DECLARES

Director Appears Before Recess Committee and Requests Funds For Four Year Term

Dr. S. W. Welch, state health officer of Alabama, told the recess budget committee of the legislature on Tuesday afternoon that the state should spend $1,898,492 on public health activities for the four years 1927-1930 inclusively. Present health appropriations would only authorize the expenditure of $[illegible],000 during the four years.

Dr. Welch appeared before the committee to first give an account of the work being done by the health department and the results being achieved and then to suggest the amount of money necessary to take care of the work of the department during the next four years. He brought before the committee a number of charts showing the wonderful results accomplished by the department in the work of malaria, typhoid, pulmonary and other disease control. The committee gave Dr. Welch the closest attention.

Dr. Welch asks for $357,120 to be appropriated for the fiscal year beginning October 1, 1927. There follows a graduated increase from this amount through the quadrennium ending in 1930. He asks for $447,776.95 in 1928, $526,213 in 1929 and $571,733.

Dr. Welch says it will be necessary for the state to expend an additional $38,155 in 1927 over present appropriations to take care of activities established by the international health board and the United States Public Health Service. This includes such things as county organization, engineering, epidemiology, laboratories, malaria control and vital statistics.

Dr. Welch asks for $54,615 in 1927 for normal expansion and $79,350 during the same year for new activities. These amounts scale upward for other years of the quadrennium ending September 30, 1930.

HEALTH RESEARCH HEAD TO ARRIVE THIS WEEK

Dr. Dale S. Young to Take up State Work Tuesday

Dr. Dale S. Young, recently appointed director of research and information at the state department of education, will arrive in Montgomery to assume the duties of his position on Tuesday. Dr. Young has a Ph. D. degree in educational administration from Columbia university, has been engaged ineducational work in Indiana and Illinois in the past few years.

He has had special training in educational research and statistics, of which he will have charge in Alabama.

The creation of the new office was made possibel by a donation from the general educational board of New York, which has been cooperating with the Alabama department for the past 15 years.

STATE ON THRESHOLD OF 100 PER CENT HEALTH SERVICE, SAYS WELCH

Ohio Only State Having Higher Rating For Rural System; Recent Legislation Gives Alabama Chance To Lead World

By HAROLD STEPHENS

Alabama, alone among the states of the American Union, stands upon the threshold of statewide public health service. A feasible plan, the financial backing of which was guaranteed by the recent Legislature, and which has been seconded by the Rockefeller Foundation, by which this may be accomplished in two years, has been prepared by the State Board of Health under the direction of Dr. S. W. Welch, state health officer. In 1929, Alabama should have a public health system affording direct protection to every person within the boundaries of the state, a status of organization which heretofore has not been attained by the public health department of any state government in the world.

Alabama, whose urban public health work has been graded 100 per cent, has long been among the leaders in the efficiency of its rural public health system. Ohio, the only state which leads it, had a rural health rating, based on the proportion of the rural population directly [illegible] by health work[illegible] of 59 per cent on Jan. 1. To date, so far as is known, this rating has not increased. Alabama's rating, based on a similar calculation, on Oct. 20 reached 57.48 per cent, a bare 2.19 per cent under Ohio.

45,000 Additional Citizens

On that date an increase in Alabama's public health work which would cover 45,000 additional citizens of the state, would have placed Alabama in the lead. A few weeks ago, an appropriaiton for a health unit in Wilcox County was made. Oo Nov. 14, it is anticipated, Washington County will make a similar appropriation. The total population of the two counties is more than 45,000. With health units in each, Alabama, in a few weeks, will lead the American states in the efficiency of its public health department.

Of the 67 counties in Alabama, there are 33 in which there is an organized public health department at the present time. They are, principally, the larger and more prosperous counties of the state. The total annual costs of the county health systems in these 33 counties, which is met by the county, state and federal governments, is $649,614.

The annual costs of the 34 county health departments necessary to give Alabama a state-wide system will be $256,000. When all the counties of Alabama are organized, the contributing agencies will be spending a total of slightly more than $900,000 per annum for the protection of the state's citizens.

$2,500 for Each County

Without the state appropriation of $2,500 to each county having an organized health system, which was made by the Legislature, and without the financial and advisory assistance of the Federal Government and the Rockefeller Foundation, it would be impossible to perfect Alabama's public health system.

The health authorities, in their work, encountered the same situation which was met by the educational workers of the state before provision was made for an equalization fund. In the more prosperous counties the work was being carried on as it should; in the poorer and less populous counties, economic reasons made public health work inexpedient.

In casting about for a remedy, they have made the same choice as the educational authorities. An equalization fund, which will supply the deficit in the expenses of a public health unit after both state and county have contributed, was resolved upon.

In working out a feasible plan, the first step was to find the per capita cost of the present county health systems to the various counties. In arriving at this, Jefferson, Mobile and Montgomery Counties, which were largely urban, were eliminated, as the statistics on rural health work were wanted.

It was found that the rural counties already organized were paying on the average, 18 cents per capita, or 4.98 cents per $100 of assessed property for health service. In making these figures the basis for calculation, 5.5 cents was substituted for 4.98 cents to give a margin of safety.

Two Types of Units

Two types of county health units, one to cost $7,000 annually and the other $9,000, were considered desirable for the poorer counties. The $7,000 unit provides for a health officer, a nurse and a secretary; and the $9,000 unit an additional member—a sanitary inspector.

On the same per capita and property valuation basis as the other counties, 18 cents and 5.5 cents, the unorganized counties may have a public health unit. Because these figures are the average of the organized counties, and because the property assessments will differ in its proportion to the number of inhabitants of each county, an allotment to be paid by any county as computed by the one, will vary from the result as computed by the other. In some cases the difference was found to be as much as $2,000.

The State Board of Health, making its allotments to the various counties, chose the smaller figure in almost every instance. It was only in those counties where, for economic reasons peculiar to the county, the county is able to pay the larger sum, that they made it the basis for their allotment.

In no case, they ruled, is the county to pay more than $5,000 during the first year toward the public health unit. And that amount is made the division line between a $7,000 and a $9,000 unit.

The county will pay its allotment toward the health unit, the state will pay $2,500 toward it, and the deficit will be supplied by the equalization fund. The equalization fund will be made up, half by the State Health Board and half by the Rockefeller Foundation.

Held Conference

Dr. Welch, on October 11, held a conference with Dr. John A. Ferrell, associate director of the Rockefeller Foundation, at which the plan was discussed and memoranda taken. Nov. 5, the Foundation advised Dr. Welch by telegram, which was confirmed by a letter of the same date, that they had approved the plan and would lend their financial and advisory assistance.

The equalization fund will amount to $44,000 a year, when the state is fully organized. It is estimated, however, that it will require two years to complete the organization of the entire State.

The project, Dr. Welch states, has met with enthusiasm wherever it has been made known. One county has already agreed to the proposals of the State Board of Health and another, which has tentatively agreed is expected to act definitely on Nov. 14.

The Rockefeller Foundation has also agreed to aid in the financing of the work of organizing the counties. It will pay half the salaries and traveling expenses of two additional field directors for a period of two years, at an annual expense to it of $6,100.

The Foundation has further agreed to share the expense of training the health workers who will assume positions in the 34 new county health units. There will be 34 new health officers, 34 new public health nurses, and 10 or 12 sanitary inspectors.

Average 45 days.

The average amount of training will be 45 days. Twenty-five per cent of those who begin the trainnig, it is estimated, will be found unsuitable for the work.

The total costs of training the health officers and nurses will be $25,000. The Rockefeller Foundation will pay $12,500 of this and the State a similar amount.

For organization purposes, the 34 unorganized counties of the State have been divided into five districts, and a representative of the State Board of Health appointed to have charge of the work of organizing each division. The five divisions are: Northwestern, Dr. B. F. Austin, Birmingham, Marion, Winston, Lamar, Fayette, Pickens, Green, Bibb and Shelby Counties; Northeastern, Dr. C. L. Murphree, Birmingham, Jackson, DeKalb, Cherokee, Cleburne, Blount, St. Claire, Clay and Randolph; Southwestern, W. C. Blasingame, Montgomery, Choctaw, Washington, Clarke, Hale, Perry, Wilcox, Autauga and Lowndes; Southwestern, J. M. Graham, Montgomery, Butler, Chilton, Conecuh, Crenshaw, Geneva and Henry; Central, Dr. D. L. Cannon, Montgomery, Coosa, Macon, Bullock and Russell.

The unorganized counties, with the allotment to be paid by each, the amount of the state subsidy and the deficit to be paid from the equalization fund, are:

	County Appropriation	State Subsidy	Deficit
Autauga	$ 3,400	$ 2,500	$ 1,100
Bibb	3,400	2,500	1,100
Blount	3,900	2,500	600
Bullock	3,200	2,500	1,300
Butler	5,000	2,500	1,500
Cherokee	3,000	2,500	1,500
Chilton	5,000	2,500	1,500
Choctaw	3,500	2,500	1,000
Clarke*	5,000	2,500	1,500
Clay	2,200	2,500	2,300
Cleburne	1,800	2,500	2,700
Conecuh	4,000	2,500	500
Coosa	5,000	2,500	4,500
Crenshaw	3,000	2,500	1,500
DeKalb*	5,000	2,500	1,500
Fayette	3,100	2,500	1,400
Geneva*	5,000	2,500	1,500
Greene	3,000	2,500	1,500
Hale	3,500	2,500	1,000
Henry	3,100	2,500	1,400
Jackson*	5,000	2,500	1,500
Lamar	2,600	2,500	1,900
Lowndes	3,500	2,500	1,000
Macon	3,900	2,500	600
Marion	3,700	2,500	800
Perry	3,600	2,500	900
Pickens	3,300	2,500	1,200
Randloph	3,400	2,500	1,100
Russell	3,900	2,500	600
St. Claire	4,200	2,500	300
Shelby	3,000	2,500	1,500
Washingt'n	3,300	2,500	1,200
Wilcox	3,500	2,500	1,000
Winston	2,000	2,500	2,500

Total $123,000 85,000 44,000

*—$9,000 health unit.

Health - 1927

Arkansas.

LITTLE ROCK
ARKANSAS

TO HOLD CLINIC FOR NEGRO BABIES

Legion Auxiliary to Aid Bethany Relief This Year.

The Child Welfare Committee of the American Legion Auxiliary, department of Arkansas, will sponsor the clinic for negro babies this year at the Arkansas State Fair, co-operating with the Bethany Relief Association in a splendid program for health betterment.

SEP 25 1927

Mrs. S. T. Donohoe, state chairman of child welfare for the Legion Auxiliary will be assisted by Mrs. Homer Adkins and Mrs. Tom Poe, together with members of the auxiliary who will act as hostesses each day at the clinic, and by members of the Bethany Relief Association and many negro doctors and nurses who are volunteering their services as they have for the past several years.

In assuming charge of the negro baby clinic, the committee is carrying out that part of the fraternal program which offers health care to the families of all ex-service men, whether white or negro. This is the first time, that the child welfare program has been extended to the negro group, and much interest is being shown in the clinic under the proposed plan.

It is hoped that the clinic will be such a success that it will be made a permanent feature of the program.

The supervising doctors will be Dr. Sid Crawford and Dr. Wayne Clark, both ex-service men and the nurses in charge will be Mrs. Adkins and Mrs. Poe, both of whom were abroad with the Red Cross, during the war. Mrs. Adkins served 11 months in Base Hospital No. 60, in France and 11 months at Camp Beauregard, Alexandria, La.. Mrs. Poe was with Unit T, in England, where she spent six months in hospital service.

The National Guard will furnish two tents, one to be used as a reception room, where children, will be given a preliminary examination for communicable diseases, before being admitted to the clinic, and the other to be used as a dressing room.

Negro workers who will assist have been appointed as follows: Dr. E. L. Fearn, Dr. J. M. Robinson, Dr. A. H. Brown, Dr. J. V. Jordan, Dr. G. W. Hayman Jr., Dr. C. J. Perkins, Dr. J. O. Hickman, Dr. H. A. Powell, Dr. F. C Goodwin, Dr. L. Routen, Dr. C. M. Auter, Dr. G. W. S. Ish, Dr. C. W. Hill, Dr. C. B. Nicholson, Dr. J. G. Thornton, Dr. W. B. Black, Dr. F. T. Jones Dr. R. J. Meaddough, Dr. G. W. Hayman Sr.

LITTLE ROCK, ARK.

DEC 25 1927

NEGRO HEALTH CENTER TO ENTERTAIN CHILDREN

Bethany Relief Association Will Give Christmas Program at 3 p. m. Tomorrow.

Fifty children will be entertained with a special program and distribution of gifts by Santa Claus at 3 p. m. tomorrow at the Bethany Relief Association, negro health center, 820 West Ninth street.

On the following day 16 children of the home will be given a turkey dinner under the auspices of the association. The Christmas tree and toy room will be open for inspection of the public from 10 a. m. to 4 p. m. today.

The children's celebration has been made possible by contributions by four white merchants of the city, while the turkey dinner was donated by the Christian church, negro, a Masonic lodge, negro, and Vivian Moore's orchestra, negro.

The Bethany Relief Association serves as an aid to several white welfare agencies. It is the only negro institution in the state which cares for working mothers, their children and homeless children. It conducts a free children's clinic and a free employment bureau.

Health - 1927

D.C.

THE ELKS AND INFANT MORTALITY

The Improved Benevolent and Protective Order of Elks is rendering a distinctive service to the Negro race in this country by obtaining statistics on the actual mortality of Negro children through a survey of every community of over 5,000 in which Negroes constitute ten per cent or the population and planning necessary steps to reduce the mortality of Negro babies. A commission provided for at the last grand lodge session is now actively engaged in the work. The true status of Negro longevity has never been known or clearly defined because only part of the country is in the registration area. The work planned is comprehensive and the statistical report will be very complete.

This is an excellent example of the sort of work that our fraternal and other organizations can do. It is estimated that our infant mortality rate is almost twice as great as that for white children. Education, sanitation, personial hygiene and improved economic status can reduce our infant mortality to a minimum. At present it is a great physical, pschological and financial strain on our group which cannot be tolerated. No more constructive public service has ever been performed by one of our fraternal organizations than this effort of the Elks. It is a great credit to them.—The Courier

MORTALITY COMMISSION MEETS

Commission On Infant Mortality Holds Meeting In Washington

Washington, D. C.—The commission on infant mortality provided for at the last grand lodge session of the I. B. P. O. E. of W., held in Cleveland, the office of the grand exaulted ruler, J. Finley Wilson, for the purpose of making plans to prosecute the work that started the commission into existence.

Plans were formulated to obtain the actual mortality of the colored children. This to be done for the reason that the true status of the longevity of the Negroes of this country has never been known or clearly defined. The American health officers and writers have sent out of the country all sorts of reports about Negro mortality, and have made all kinds of unverified statements. The real physical status of the Negro is in a dilemma as far as the people generally know or health records show.

This commission is going to make a complete survey of every city of 5,000 and more, when Negroes form 10 per cent of the population. It is the intention of the commission to get the berth and death rate and make a comparision and then summarize the conditions found in each community. The entire country is to be divided into sections; after the sectional statistics are obtained they are to be analyzed and given to the country without coloring. It is the intention of the commision to recommend corrective measures so the necessary steps may be taken to reduce to a minimum the infant mortality of the race.

APRIL WAS BEST HEALTH MONTH ON RECORD IN U .S.

WASHINGTON, D. C., June 8.—With a drop of 21.6 per cent in the death rate for April, the industrial populations of the United States and Canada show the best health record ever made in this month, as measured by more than 18,000,000 industrial policy holders of the Metropolitan Life Insurance Company. The rate for this large cross-section of the population was 9.5 per 1,000.

While the drop in April was more pronounced than for the preceding three months of the year, all four months have registered a decline over the corresponding months of 1926. Every important cause of death except typhoid fever, diphtheria, suicides and automobile fatalities recorded a lower rate in April than in the same month in 1926, the most conspicuous declines being those for measles, whooping cough, influenza, heart disease, pneumonia and chronic nephritis.

THE ROBERT T. FREEMAN SOCIETY OF WASHINGTON STAGES ITS ANNUAL DENTAL HEALTH CAMPAIGN

The Robert T. Freeman Dental Society of Washington, D.C., completed its dental health campaign April 27, with a public meeting and exhibition of dental health posters and slogans, designed and writen by the pupils of the elementary and junior high schools of the city, at which time cash prizes for the best posters and slogans were awarded.

The meeting and exhibition was staged at the Dunbar High School, the awards being made by Mr. Garnet C. Wilkinson, Assistant Superintendent of School. The art work was done under the direction of Miss Rosa Nixon, directress of art in the public schools.

Dr. W. C. Claytor, chairman of the Mouth Health Committee of the society, presided and addresses were made by Dr. Arnold Donawha, subject, "Diet"; Dr. Clifford C. Fry on "The work in the School Clinics"; Dr. Stephen J. Lewis, "The General Aspects of Dental Health Campaigns," and Dr. C. Willard Camalier representing the District of Columbia Dental Society.

The campaign covered the period from April 4th to 30th inclusive, and consisted of public lectures before civic and parent-teacher associations, the placing of dental health educational posters in places of business, the distribution of dental health instruction programs to every child in the public school system, and the display of dental health slides in the movie houses of the city. Dental health movies were shown at the pubic meeting and exhibition.

This is the second dental health campaign staged by this society and it proved a worthy addition to the educational health work being done by the profession as represented by our group.

Howard Makes Medical Exhibit For The A. M. A.

Washington D. C.—Striking exhibits were made by Howard University for the American Medical Association in the corridor of the Department of the Interior building.

One was prepared by the Howard department of public health and hygiene and comprised charts showing the comparative death rate, the comparative prevalence of tuberculosis, and the geographical distribution of medical, dental and pharmaceutical graduates. There were also pictures of recent graduating classes, with the president, secretary-treasurer and dean of medical school.

Another exhibit comprised blue prints and front elevation of the new medical building, with a bird's eye view of the campus. Some of the antique instruments formerly used in practice of medicine and dentistry were also shown.

Dr. Schwartz Discusses Mortality Among Negroes

The Medico-Chirurgical Society, of which Dr. Charles M. Wilder is the president, was addressed by Dr. E. J. Schwartz, assistant health officer of the District of Columbia, Mu-So-Li Club, Thursday evening, February 24.

The subject of Dr. Schwartz was "The High Negro Mortality in the District of Columbia with Remedial Suggestions." He pointed out that over a five-year period the death rate among Negroes in the District of Columbia had exceeded the birth rate by 1,641 deaths. Without an influx of colored persons into the District of Columbia, he pointed out, there would ultimately be an extinction of the Negro population here.

The predominant causes of the high death rate among colored persons were given by Dr. Schwartz as pneumonia, tuberculosis, heart disease, Bright's disease and infant mortality. Deaths from heart diseases among colored people have taken a sudden jump within recent years, he said.

Child Hygiene Needed

Dr. Schwartz particularly stressed the greater need for child hygiene service in order to lower the death rate among colored people.

In a discussion that followed, Dr. Algernon B. Jackson of Howard University declared that if a movement for better health is to be started, it must be started by Negroes and for Negroes. He said that health is a national problem and the national conscience must be aroused.

Dr. W. A. Dumas asserted that the high death rate among Negroes is due largely to economic conditions. He cited examples of poverty which had prevented the proper medical treatment of cases attended by physicians had been called in time.

One of the reasons for the high death rate among colored persons, Dr. A. M. Curtis said, is the failure or refusal of municipal authorities to appoint colored health officers who would be interested in health conditions among Negroes. The meeting was very largely attended.

Health - 1927

D.C.

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Health - 1927

Europe.

BIRTH-RATE DECLINE IN ENGLAND—France's falling birth-rate is a familiar subject, but it surprizes some to note that in England and Wales the birth-rate for 1926 of 17.8 per thousand population is the lowest recorded since the establishment of civil registration in these countries, excepting only the rate of 17.7 in 1918, the last year of the war. As cited in the Manchester *Guardian*, the Registrar-General's *Statistical Review* declares that:

Literary Digest

"It is probable that the rate for 1927 will be lower than that for 1918. With the exception of Sweden the rate now is the lowest of the principal European countries, not excepting France. The deaths of infants under one year of age were equal to seventy per thousand births, or five per thousand below the rate recorded in each of the two preceding years, and one per thousand above the rate in 1923, the lowest yet recorded.

9-3-27

"The crude death-rate was 11.6 per thousand population, and was equal to that of 1923, the lowest on record. In 1924 and 1925 the rate was 12.2 per thousand. The mortality from enteric fever, scarlet fever, and all forms of tuberculosis was the lowest yet recorded. The death-rate from measles, whooping-cough, and influenza showed a decline, while that from diphtheria was slightly higher than in 1925. The death-rate from cancer was 1,362 per million, or 26 per million higher than in 1925, and was the highest rate yet recorded. Suicides from poisonous gases, virtually all of which were from coal gas, have shown a substantial increase in recent years, from 123 in 1916 to 943 in 1926.

"Deaths on railways numbered 419 against 427 in 1925, while deaths from mechanically propelled vehicles increased from 3,412 in 1925 to 4,073. It is difficult to institute comparison between the deaths from the several kinds of vehicles owing to the cases in which two or more different types of vehicle were involved and the inquest verdict failed to indicate which vehicle was in fault. Of the cases where death was caused by one vehicle only deaths from motor-buses and cabs and tram-cars showed a very slight increase from 529 in 1925 to 539 in 1926. Of the deaths from other vehicles those from motor-cycles increased from 543 to 783 and those from motor-cars from 987 to 1,173.

"The general death-rate and the infant mortality are low compared with the reports prevailing in most of the other countries."

Health. 1927

Florida.

West Palm Beach Fla.

Post

APR 6 1927

FIRST NEGRO BABY CLINIC IS HELD HERE

The first negro baby clinic in West Palm Beach was recently inaugurated under the direction of Miss Myrtle Funsch, director of the nursing bureau of the health department.

The next session will be held on Thursday, April 28. The plan adopted is to hold them the last Thursday of each month.

At the inital gathering 19 negro babies were measured by Dr. Martha Wilson, examined and their parents advised for the correction of the children's defects and diets.

Health - 1927

General.

Commission On Infant Mortality Holds Meeting

WASHINGTON, D. C., Jan. 27.—The commission on infant mortality provided for at the last grand lodge session of the I. B. P. O. E. of W., held in Cleveland, Ohio, last August, met in this city at the office of the Grand Exalted Ruler J. Finley Wilson, for the purpose of making plans to prosecute the work that called the commission into existence. The Grand Exalted Ruler has had this plan in mind for sometime. Shortly after the adjournment of the Cleveland convention he appointed the following commissioners: Drs. William J. Thompkins, Kansas City Mo.; John B. Hall, Boston, Mass. Philip Scott, Newport News, Va. T. T. Wendle, Lexington, Ky., Charles B. Fisher, Algernon B. Jackson, Washington, D. C. The commission organized by electing Dr. Thompkins, chairman; Dr. Fisher, secretary; Dr. Jackson, committee on publicity; Dr. Scott, vice-chairman; Chas. E. Hall, statistician. Dr. Charles A. Marshall, of this city, sat as a proxy on the commission for Dr. Wendle, who was unable to attend the meeting.

Plans were formulated to obtain the actual mortality of the colored children. This is to be done for the reason that the true status of the longevity of the Negroes of this country has never been known or clearly denied. The American health officers and writers have sent out to the country all sorts of reports about Negro mortality and have made all kinds of unverified statements. The real physical status of the Negro is in a dilemma as far as people generally know or health records show.

This commission is going to make a complete survey of every city of 5,000, and more, when Negroes form 10 per cent of the population to get the birth and death rate and make comparison and then summarize the conditions found in each community. The entire country is to be divided into sections; after the sectional statistics are obtained they are to be analyzed and given to the country without coloring. It is the intention of the commission to recommend corrective measures so the necessary steps may be taken to reduce to a minimum the infant mortality of the race.

Plans are already in the making to send out questionnaires to health officers, to every Elk lodge and each Elk examining physician. In addition it is the intention of the commission to use every available source to obtain accurate statistics on the mortality of the Negro. The work as planned is to be so comprehensive and the statistica data compiled so complete, that the definite mortality nd the alleged high death rate of he Negro will be ascertained and the necessary remedial steps be provided.

J. Finley Wilson, the Grand Exalted Ruler, addressed the commission and pointed out to the members the necessity of utilizing every agency to ascertain the infant mortality in the race. He told them that the work in which they were engaged was of such grave importance, of such invaluable help to the race, that by a conscientious performance of the work for which they were appointed, they would make history not alone for the Elks of the World but they would, by their survey and recommendations, be given an imperishable place in the history of the race. It is said that our race is dying out fast. It is for you to ascertain the verity of such statement If true then find the cause and recommend a remedy.

EDUCATORS WANT REMOVAL OF COMMISSION ON INFANT MORTALITY HOLDS MEETING

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Friday Evening Club Entertained.

Mrs. Saidee V. Holly entertained the Friday Evening Club at 500 on Friday evening. Among those present were Mesdames Mary E. Hall, Emmett J. Scott, Percy Bond, Louise Burrell, Eula Gray, Emma Bauduit, Thomas H. R. Clark, E. G. Evans, Perry Howard, Kelly Miller, William Lew, William Tignor, Emma Wormley, Mrs. Grey and the Misses Edna Gray, Ella Perry, Alice Preston. A sumptuous repast was served, and attractive prizes were awarded.

POST
WASHINGTON, D. C.

JAN 23 1927

NEGROES PLAN INFANT MORTALITY SURVEY

Elks' Committee Orders Nation-Wide Data on Birth and Death Rates.

Negro infant mortality, as set forth by statistics of the census department and other bureaus, was discussed yesterday at grand lodge headquarters here by a committee of colored Elks appointed at the Cleveland convention of the grand lodge, with a view to ascertaining and defining the negro's longevity status in America. A survey was ordered of every city of 5,000 or more inhabitants where the negro represents 10 per cent of the population, for a comparative survey of birth and death rates.

The country was divided into [illegible] and data ordered to be compiled various sections, and for the nation a whole. A special report will made on sanitary conditions in section to the next grand lodge session. Questionnaires were directed sent all colored Elk lodges, examining physicians and city health officers.

The committee consisted of Dr. William J. Tompkins, Kansas City, Mo., chairman; Dr. Philip A. Scott, Newport News, Va., vice chairman; Dr. Charles B. Fisher, secretary; J. Finley Wilson grand exalted ruler; Dr. John B. Hall of Boston; Dr. T. T. Wendell, of Louisville; Dr. Algernon B. Jackson, of Howard university, and Charles E. Hall, of the census bureau, statistician.

ELK COMMISSION ON INFANT MORTALITY and HYGIENE

J. Finley Wilson, the Grand Exalted Ruler, addressed the commission and pointed out to the members the necessity of utilizing every agency to ascertain the infant mortality in the race. He told them that the work in which they were engaged was of such grave importance, of such invaluable help to the race, that by a conscientious performance of the work for which they were appointed, they would make history, not alone for the Elks of the World, but they would, by their survey and recommendations, be given an imperishable place in the history of the race. It is said that our race is dying out fast. It is for you to ascertain the verity of such statement. If true then find the cause and recommend a remedy.

Commission On Infant Mortality Holds Meeting

Washington, D. C., Jan. 26.—The commission on infant mortality provided for at the last grand lodge session of the I. B. P. O. E. of W., held in Cleveland, Ohio, last August, met in this city at the office of the Grand Exalted Ruler, J. Finley Wilson, for the purpose of making plans to prosecute the work that called the commission into existence. The Grand Exalted Ruler has had this plan in mind for some time. Shortly after the adjournment of the Cleveland convention he appointed the following commissioners: Drs. William J. Thompkins, Kansas City, Mo.; John B. Hall, Boston, Mass; Philip Scott, Newport News, Va.; T. T. Wendle, Lexington, Ky.; Charles B. Fisher, Algernon B. Jackson, Washington, D. C. The commission organized by electing Dr. Thompkins, chairman; Dr. Fisher, secretary; Dr. Jackson, committee on publicity; Dr. Scott, vice chairman; Charles E. Hall, statistician. Dr. Charles A. Marshall, of this city, sat as a proxy on the commission for Dr. Wendle, who was unable to attend the meeting.

Plans were formulated to obtain the actual mortality of the colored children. This is to be done for the reason that the true status of the longevity of the Negroes of this country has never been known or clearly defined. The American health officers and writers have sent out to the country all sorts of reports about Negro mortality and have made all kinds of unverified statements. The real physical status of the Negro is in a dilemma as far as people generally know, or health records show.

This commission is going to make a complete survey of every city of 5,000 and more, when Negroes form 10 per cent of the population. It is the intention of the commission to get the birth and death rate and make comparison and then summarize the conditions found in each community. The entire country is to be divided into sections; after the sectional statistics are obtained they are to be analyzed and given to the country without coloring. It is the intention of the commission to recommend corrective measures so the necessary steps may be taken to reduce to a minimum the infant mortality of the race.

Plans are already in the making to send out questionaires to health officers, to every Elk lodge and each Elk examining physician. In addition it is the intention of the commission to use every available source to obtain accurate statistics on the mortality of the Negro. The work as planned is to be so comprehensive, and the statistical data compiled so complete, that the definite mortality and the alleged high death rate of the Negro will be ascertained and the necessary remedial steps be provided.

J. Finley Wilson, the Grand Exalted Ruler, addressed the commission and pointed out to the members the necessity of utilizing every agency to ascertain the infant mortality in the race. He told them that the work in which they were engaged was of such grave importance, of such invaluable help to the race, that by a conscientious performance of the work for which they were appointed, they would make history, not alone for the Elks of the World, but they would, by their survey and recommendations, be given an imperishable place in the history of the race. It is said that our race is dying out fast. It is for you to ascertain the verity of such statement. If true then find the cause and recommend a remedy.

GAZETTE-TIMES
PITTSBURG, PA.
FEB 1 1927

IN LEAVENWORTH, Kan., in the calendar year 1925, eight colored and 27 white infants died before reaching the age of 1 year. The ratio of deaths per 1,000 live births was 615.4 colored and 94.1 white. In Montclair, N. J., the deaths were one colored and 31 white, the ratios being 18.9 colored and 100 white to 1,000 live births. Between these extremes the Department of Commerce lists some 85 cities in more than 75 per cent of which the infant mortality runs heavily against the colored.

Many of the reporting cities are in the South, but their records do not indicate less favorable conditions for colored residents than prevail in many northern centers. New Bern, N. C., has a ratio of 193.8 colored and 62.9 white infant deaths to 1,000 live births in each category; Chester, Pa., 192.3 and 88. Pittsburgh, with 145 colored and 1,135 white infant deaths, had a ratio of 102 colored and 79.4 white. The exhibit is very much against the humanity of a nation which has waxed enthusiastic in support of the rights of racial minorities in European countries.

If it be conceded that political equality is important, how much more so is it that the right to live be accorded? On purely practical grounds is it not imperative that the living standards of every class in every community be maintained as high as possible? If too large a proportion of colored babies die in infancy it may be concluded that an unduly great number of those who grow to maturity are weaker and more susceptible to disease, thus tending to dependence, than is good for the community. Obviously there is something to be done in the United States to eliminate a condition, with respect to the colored population, that is disgraceful to the nation.

KANSAS CITY
MISSOURI
JAN 28 1927

NEGRO ELKS TO CHECK LIFE SPAN

Reported High Mortality and Longevity Will Be Object of Investigation.

The extraordinary longevity of certain Negroes is to be investigated in connection with the alleged high mortality of the Negro race by the Negro Elks' commission on infant mortality, of which Dr. William J. Thompkins is chairman.

The commission was created at the last grand lodge session of the order in Cleveland. Following the national meeting the commission met in Washington at the offices of J. Finley Wilson, exalted ruler of the Elks' and planned its activities.

Records Are Doubted.

Dr. Thompkins and other members of the commission believe reports both of the remarkable ages attained by Negroes and also of the high mortality of the race are based on unverified statements.

The commission's first act will be to obtain definite mortality statistics, particularly in respect to the mortality of children.

The commission will make a survey of every city of 5,000 or more population in which Negroes form 10 per cent of the population. The commission will obtain the birth and death rates and summarize conditions found in each community.

Full Study Planned.

The entire country is to be divided into sections and after the sectional statistics are obtained they will be analyzed. The commission then will recommend measures to reduce infant mortality.

Questionaires will be sent to health officers, to Elk lodges and to physicians in an attempt to determine the status of Negro mortality.

Other members of the commission besides Dr. Thompkins are John B. Hall, Boston; Philip Scott, Newport News; T. T. Wendle, Lexington, Ky.; Charles B. Fisher, and Algernon B. Jackson, Washington.

HEALTH OFFICIALS VACCINATE 90,000

Scattering of Typhoid and Smallpox Reported From Concentration Camps

MEMPHIS, TENN., May 5.—(AP)—More than 90,000 refugees have been given typhoid and smallpox immunization by the medical division of the Mississippi flood relief forces. This is an increase of more than 10,000 vaccinations over yesterday and the rate is expected to increase as larger supplies of serum are rushed to the concentration camps.

Meanwhile reports from state health officers to Dr. Wm. R. Redden, medical director for the Red Cross, continued to disclose cases of typhoid and smallpox in the refugee camps. Dr. E. L. Bishop, Tennessee health officer, reported three cases of typhoid and eight of smallpox.

Scattering of both these dred diseases were raported from Louisiana concentration camps today. Dr. Oscar Dowling, Louisiana state health officer said five cases of typhoid were being treated within the flood area and that two cases of smallpox were reported.

Reports from Arkansas where 18 cases of typhoid were listed Tuesday were not available today. Kentucky reported no disease except for five cases of malaria. Mississippi figures were not at hand.

The refugee situation throughout the valley was said to be vastly improved today. Rescue work continued in the newly flooded areas of Louisiana while waters were reported slowly falling in the older flooded regions greatly facilitating the movement of supplies and preparations for rehabilitation.

Labor agents were said to be active among negro refugees in Yazoo City, Miss., concentration camp and citizens formed a vigilance committee to deal with the offenders.

Health -1927

General

SPRINGFIELD

ILLINOIS

MAR 17 1927

FOR THE COLORED DOCTOR.

Julius Rosenwald has set aside two hundred and fifty dollars a month for the aid of worthy colored students in medical college.

There is no more practical philanthropy than this. In the ambition of the colored race to become self-sufficient, one of its first needs is competent medical practitioners. Upon health and sanitation depends the social development of any group. Leaders in education, religion, medicine are needed among the colored people. Right now medical service appears to be the key need. Mr. Rosenwald's act will do immense good but its importance in pointing out to the American people a vital subject for attention is not to be overlooked.

Spirit of The Press

Health

From the Philadelphia Public Journal

The Negro has proved to be a very hardy type. Brought to a clime which differed as much from his native habitat as two regions could reasonably differ for human habitation, he has thrived in the new environment despite all obstacles. At the same time his numbers have multiplied to such an extent that there are but few white nations today whose populations exceed the total number of Negroes in America.

Nevertheless, the American Negro needs a word of caution at this point. Statistics seem to indicate that the mortality rate among Negroes is increasing instead of diminishing. Where one might expect to find the race far ahead of mortality conditions of a decade ago, we note with consternation that the figures more nearly resemble the ghastly ratios of several decades ago when we were still excusing our ailments and shortcomings because of slavery.

In the final analysis, the test of the Negro in America will very likely be his ability to stand up under the withering influences of civilization and the ravages of civilized diseases which assail him from all sides. The great white plague and the loathsome social diseases are scourges which must be guarded against with desperate determination, for unless we take care we shall find that these are cutting our numbers

THE FIGHT AGAINST DISEASE

In the last twelve months the United States Public Health Service has made notable progress in its fight against disease Surgeon General Hugh S. Cumming reports several signal achievements. Especially noteworthy has been the progress made against Rocky Mountain spotted fever, scarlet fever, goitre and diphtheria.

The Health Service has lessened the danger of scarlet fever by the development within the last year of a product that is used in the prophylactic treatment of the disease. Dr. Cumming says it is successful and that scarlet fever is now under control. The Health Service has been working on the standardization of this product in the laboratory. The department is campaigning against measles, which Dr. Cumming says has become more serious than scarlet fever. "We have standardized some anti-dysentary serum," he announces. "Diphtheria in the last few months has been practically put under control by the use of antitoxin. It is as efficacious in preventing diphtheria as vaccine is in smallpox." There is less goitre now because it is being cured by the use of iodine. Among other recent achievements, the Health Service has remedied the bubonic plague situation in California and made effectual use of airplanes in combating the malarial mosquito.

The most interesting and probably the most notable accomplishment of the Health Service in the last year was the victory it won over Rocky Mountain spotted fever, a particularly deadly malady. The department has been at work on this disease for about twenty years, and in that time has lost three or four medical officers, according to Dr. Cumming, who adds that two service men had the fever this year. "But we have something to show now," he says. Spotted fever is caused by the bite of the Rocky Mountain tick, which has proved fatal in more than seventy-five cases out of a hundred. "I think we have produced a vaccine for the disease made from the infected ticks," the Surgeon General says. "We vaccinated 123 sheep herders in Idaho and Montana and not one of them has had the fever this year. Dr. Spence of our service vaccinated himself first. In the Bitter Root Valley of Montana this disease has killed about 85 to 90 per cent of the persons attacked." Dr. Cumming terms this "a remarkable piece of work, because nobody has ever made vaccine in that way."

News of such progress serves to reassure us that our Federal Health Service is unrelenting in its war against disease, and to remind us of the vastly important place it occupies in our government. Its work and that of State and local health departments supplement each other; their activities are well co-ordinated. Locally, sectionally and nationally the work goes on with good results, and the improvement in health conditions is steady almost everywhere in the country.

As an example of the steady decline of disease, the statistics on typhoid fever in Philadelphia are interesting. In 1900 there were 3,227 cases of typhoid fever in that city; in 1926 there were only 218. In the first ten months of 1926 there were only twenty-eight deaths in Philadelphia from that disease, as compared with forty-two for the corresponding period in 1925. Dr. Wilmer Krusen, Philadelphia's director of public health, attributes the decline to the protected water supply, sewage disposal, pasteurization of milk, sanitary handling of foods and to typhoid inoculation. These things have come about through sanitation policies effected largely through the efforts of public health authorities. In virtually every city in the country similar work has been done.

Statistics on scarlet fever in New York afford another example of the steady decline of disease. In 1921 the number of cases of scarlet fever in New York was 15,516; in 1926 the number had been reduced to 7,928.

Public health work has many victories to its credit, whether by Federal, State or local authorities. One of its hardest fights has been against something other than disease: It has had to conquer public opinion. This victory has been one of its greatest, for it has been one of its most complete.

AN URGENT NATIONAL PROBLEM

Washington, Mar. 7—Milk is said to be a perfect food. By this, says the U. S. Children's Bureau, is meant that it contains all the essential elements, which if taken in sufficiently large amounts, allow normal and symmetrical development. Health and even the maintenance of life itself may depend upon the presence in certain indispensable constituents of diet. For children under two years of age breast milk or other milk is an absolute necessity for proper nutrition which will enable the coming generation not only to measure up to the past standards but to improve upon them steadily. One urgent national problem is to see that every child in the United States gets his full quota of milk that is standard in purity and quality.

COLORFUL NEWS MOVIES

1. DR. BUTLER'S VIRGINIA ORATION
2. NEGRO HEALTH NEEDS DEMOCRACY
3. THE NEGRO IN RECENT LITERATURE
4. ANOTHER CHAMPION

1. **Dr. Butler's Virginia Oration:** Whether conscious or not of the significance of his words and sentiments to the dark tenth part of America's population, Dr. Nicholas Murray Butler, President of Columbia University, New York, in his address last Wednesday at the University of Virginia, said enough in two terse paragraphs to cause not only Virginia, but the entire group of southern statesmen and the whole American people of America to consider again and again that "pet" theory that the "tail should wag the dog" or that each State (of the South) should become an absolute state monarchy.

Dr. Butler said: "Only if the people of America make their democratic institutions Efficient can this Nation ward off the Absolute State as the basis of Government, and life, with the consequent of Unlimited Liabilities."

Further Dr. Butler stated: "The moment the state becomes absolute somebody must be absolute. We have gotten through with monarchies; we have gotten through with the tyrannies of majorities. And if we are to resist, in our democracy, in its perpetuation, enrichment and development—if we are to resist the return of the doctrine of the absolute state under the guise of efficiency we can only do it by making ourselves, our democracy, as efficient while retaining our civil and individual liberty."

Thus spoke Dr. Butler in the heart of Virginia, avowedly one of the "capitals" of absolute state sovereignty.

This column does not wish to impose upon its readers too many recollections of phases of states rights; yet we say, earnestly, that the doctrine of state rights, of absolute state sovereignty, and of the "tyrannies of majorities" is the greatest menace which the Negro is today facing in America. The suppression of individual liberty grows out of state sovereignty. Look at educational facilities, police protection, health utilities, the ballot, transportation, housing etc., as influences of Negro life and you will see that due to municipal ordinances and state legislation, absolute citizenship to the Negro is largely encircled by the State.

The dual citizenship of everyone in the two democratic sovereignties—The United States and the State in which residence is claimed or asserted—is proving to be more than a technical cloture for the Negro. It is a civic utility which needs to be brought into the sunlight of Liberty. Is not the whole greater than any of its parts? If states continue to resist the parenthood of the United States, they may continue to resist their association, each with the other. And this just what is happening where states rights reign supreme.

Dr. Butler's theory of Government should mean much to the Negroes of America. His Virginia address should be made the subject of a special lecture in every school and university in the University States, white, colored, and mixed.

2. **Negro Health Needs Democracy:** Negro health ought not to be any

different from the health of any other American who lives, labors and loves as a peer, along with his fellow men. Yet statisticians spend sleepless nights figuring out the Negro's chance to reach three score and ten years before shuffling off this mortal coil. His chances, they say, are poor. He is too often the victim of a premature demise. Choice insurance policies are withheld from him because of his susceptibility to ill health. He is different, they say, from other people of America.

We are ready to admit that facts usually smash theories to smithereens and that, hence, Negro health is not as good as it ought to be; and yet, what are the causes of the Negro high death rate? Is the Negro a weakling? No, no! If anything he is the hardier when facing exposure. What, then, is the cause of Negro ill health?

It is the uneven life which he is forced to live under the fear on the part of the contemporary racial group that some sunny day he might become dominating and dangerous.

He comes into the world under economic stress, with few of the habilaments of infant necessity. He enters early childhood under high economic pressure. His parents are pressed for ways and means to supply him with the necessities of life. His home is down at the end of the street, far away from public utilities and other blessings, from which he is often restricted. His education is frequently scanty and diskriminatingly administered through foolish state laws which insist that the Negro should be treated differently from anyone else in America.

Thus, the physique and the mind are hampered from cradle to grave. Could it be expected that Negro health should hold its own under such stress?

The open door of democracy will do more for Negro health in a decade than ten thousand conferences will do in as many years, unless the conferences list Democracy, first, as the factor which they intend to remedy.

3. The Negro In Recent Literature:

Negroes and Negro life continue to serve as a most interesting field for literary inspiration, among the Nordics. With "Black April", Mrs. Peterkin has again given the public a book which is the result of her intimate knowledge of the habits and customs of the southern backwoods Negro. This book like her "Green Thursday", is truly a romance of the soil and the southland.

Mrs. Peterkin has done in these two books what Thomas Hardy did in his "Under the Greenwood Tree" and "Far From the Maddening Crowd." Piquant and interesting, each author's book breathes of the fields, the woods and the freshly plowed lands. They are peopled with sons and daughters of the soil—in one case white—in the other black.

We may call "Black April" an Epic in prose, dealing with the incidents that center around its dusky hero April; while "Green Thursday" is more like a pastoral poem that breathes of the simplicity of the backwood's life among Negroes in the South.

Perhaps of greater importance to the reading public, than either of these two books, depicting the Negro in fiction, are the two recent books on the Negro, as an important factor in American life. "The Negro in American Life," by Jerom Dowd, Professor of sociology in the University of Oklahoma, is a study of the Negro, dealing especially with his life since the Civil War. A brief background, treating of his life in Africa and the West Indies, and his importation into North America, is given in the introduction. The author has given his subject years of serious study and treats it in a clear and scholarly fashion, free from prejudice and bias. This book is of particular interest to the student of sociology. "The American Race Problem" by E. B. Reuter, University of Iowa, is a sociological study of the American Negro, not as a race but as a population group. Among other things, the author tries to show that scientific investigation, up to the present, does not prove the inherent mental inferiority of the Negro, nor does it afford sufficient ground for denying it.

4. Another Champion:

Through the instrumentality of L. G. Southard, Attorney of Spartanburg, S. C., the Supreme Court of that state has reversed conviction for murder of Jim Davis., who shot and killed a white road gang foreman, who had come to his house for the expressed purpose of removing Mr. Davis' two daughters. A new trial will be arranged for this man by Mr. Southard, whom we remember as the fearless lawyer, who risked his life, a few months ago in defending the Lowman family. Should Mr. Southard again be successful in clearing his client, let us hope that the mob's thirst for blood and gengeance has been sufficiently satiated on the Lowmans.

In Attorney Southard our group has found another champion. Let us then pay tribute where tribute is due, and surely it is due this worthy man. It seems that God is still giving us the men.—"The Time Demands" with—

"Strong minds, great hearts, true faith and willing hands;
Men whom the lust of office does not kill;
Men whom the spoils of office cannot buy;
Men who possess opinions and a will
Men who have honor; men who will not lie;
Men who can stand before a demagogue
And dam his treacherous flatteries without winking;
Tall men, sun-crowned, who live above the fog
In public duty and in private thinking."—

OUR DEATH RATE

There is much being said about the death rate of the Negro, as compared with the death rate of the white man, that is alarming. There are many things being said that indicate that if the rate keeps up, compared with the number of births, in a hundred years the race will be extinct, and the white race [illegible] increase. Statistics show that the [illegible] with a view of mastering their profession, and rendering their race the highest services, that the science of medicine has discovered and that humanity is entitled to? The majority of our doctors are poor because they render poor service. They think more of a dollar than they do efficiency, and the result is they lose both money and proficiency.

death rate is alarming and unnecessary. There are causes underlying this condition that ought to be discovered and remedied. There are many agencies of deficiency contributing to the shortness of Negro life and augmenting the longevity of the white man's life.

The science of medicine has established the fact that human life must have some assistance, some guidance for man to perpetuate it, and lengthen it. Expectancy of man ought to increase as mankind advances in intelligence and resources. The average life based upon scientific insurance investigations should show a rise instead of a fall.

The opinion is growing that one of the general contributaries to the high death rate among Negroes is the inefficiency of the medical attention they receive from the medical profession. It is being argued that in some quarters that the more completely the Negro depends upon medical aid from his group, the higher the death rate; and the death rate now as compared with the death rate when the white physician did 100 per cent of our practice, is much higher. It is an admitted fact that the Negro public appreciates the Negro physician next to his appreciation of the Negro pulpit. The Negro believes in race preachers, and it believes in race physicians, and the Negro doctor, next to the Negro preacher, holds an important position in Negro life, and should be eminently efficient and highly capable in the discharge of his duty to his patients. Another contribution to the Negro death rate is incompetent and ignorant white doctors, who are cheap and deficient in the science of medicine. At a time when medical science is discovering medicines that lengthen life and cure diseases that have been considered incurable for centuries, and proven to the world that diseases that have been considered contagious or hereditary, the death rate among our group should be falling instead of rising.

We believe that there is much truth in the growing belief that our death rate is largely increasing by reason of deficiency on the part of the Negro physician; that he does not study in his office or post in the best hospitals and schools in the world as does the white physician. The argument is almost conclusive that the Negro patient is not receiving the same high-class scientific service that the white patient is receiving. The average Negro doctor when he leaves school, never posts. He takes no hospital training; he does not subscribe for or read medical journals, nor scientific work bearing on his profession. He has no clinic in the cities and towns where he practices, and they do not avail themselves of such service as they might receive at Tuskegee, Meharry and other places where public clinics are held.

Let us retrospect facilities for Negro doctors to improve themselves locally. We have approximately one hundred Negro doctors and dentists in Fulton County and near-by. At Tuskegee is held annually, the first week in April, a clinic where some of the best doctors of both races in the country come and give free demonstrations, free operations and free treatment of all diseases that humanity is heir to, and we do not think we misstate the fact when we say that less than a dozen of our doctors and dentists attended this annual clinic, where they can exchange ideas, witness demonstrations, and become much more proficient in their work by actually performing operations and demonstrations themselves. At Tuskegee the first of this month we took pains to find out how many of our doctors were taking advantage of the opportunity to improve their efficiency, that they might render their patients better services, and without prejudice to those whom we did not see, and we do not claim to have seen them all, we remember seeing Drs. G. A. Howell, C. W. Powell, John W. Burney, C. W. Reeves, Dr. Georgia Dwelle and Dr. R. Carter. Sometimes we believe that the majority of our doctors are not interested in humanity or the profession of medicine, and are simply in it for the money they get out of it; that service is secondary, money is first, instead of service being first and money secondary. A majority of our doctors are not prosperous, for the reason they are not proficient. They do not love their work and when they are called, instead of answering gladly and promptly, they ask if you have any money, instead of answering in the language of Dr. Mordecai Johnson, president of Howard University, "Is humanity suffering?"

How many of our doctors have posted in New York, Boston, Philadelphia, Berlin or Edinburgh.

NOTABLES AID HEALTH MOVE

Campaign For $25,000 Fund Is Launched At Home Of Fannie Hurst

NEW YORK, Mar. 9— Plans for a campaign to obtain an endowment of $25,000 for tehe work of the national Health Circle for Colored People, Inc., were made at a meeting of the committee yesterday afternoon at the home of Fannie Hurst, 271 West Sixty-seventh Street. Besides Miss Hurst those on the committee include George Gordon Battle, the Rev S. Parkes Cadman, Ralph Jonas, Alfred A. Knopf, Adolph Lewisohn Mrs. Medill McCormick, James H. Post, Theodore Roosevelt, Nathan Straus J., Lillian D. Wald.

In a letter setting forth the aims of the organization Miss Hurst wrote:

"There is much talk about a Negro renaissance in America. Which is rather beside the point, because whate has not yet been born cannot very well be reborn.

"What actually is happening, however, is that artistically and intellectually a languid-minded race is beginning to assert its manifold talents. The Negro is by way of becoming an economic, industrial and intellectual force in national life. He is showing spottily, in those sections of the country where he has had the chance to develop, witness Chicago and New York, qualities heretofore unsuspected."

Health - 1927 General.

Comprehensive Article on Negro Infant Mortality

Kansas City, Mo.
February 24, 1927.

Mr. Nick Chiles,

My Friend:

It has been a great many years since I contributed anything to your paper. Please find inclosed my article on Negro Infant Mortality.

I suppose you read the Kansas City Negro papers, if so you will find my writings. Now and then you will read from me in "The Chicago Bee". I suppose you receive these papers on exchange. The article inclosed is to refute much of the other side that the white press has been putting in print.

Be sure and mail me your paper if you find yourself able to print what I am sending you.

Yours truly,
Ollie J. Brooks,
Artist
1308 Euclid Avenue

Kansas City, Mo.

For years, much has been printed about the death rate of Negroes being higher or equal to the birth rate.

Reading these statements so often for years back, filled me with a desire to investigate. At the time I started my investigation, I was traveling through the southern states on business, covering over 3500 miles a year. I was in his line of travel for 13 years. The work in which I was engaged made it necessary for me to visit all of the Negro homes in each town. Following is what I found as to the Negro birth:

Out of every ten Negro mothers, seven mothers had from 5 to 25 children; the other three had from one to none. My first question to each mothers, who was your family doctor when these children were born. Answer—we never have a doctor down here for giving birth to children. My next question was: How and to whom do you make a report of the birth of your children? Answer—report? what kind? To the mothers' questions I would explain, for all child birth there must be a certificate made out for the Bureau of Vital Statistics. Had I used the phrase—Dominus Vobiscum, the mothers would have understood me as well. The fact of the matter—These southern Negro mothers knew nothing whatever of any such requirements.

The state that seem to know less as to making a report to the government on Negro child birth was the state of Georgia, for instance, while standing at the depot in one of the small towns, Mr. Havens, the Negro house builder was preparing to load four railroad cars of Negroes to ship for the town Boley, Oklahoma (Negroes exclusive), here was a chance for me. I went from one Negro mother to another as to the birth of the child or children which she was holding by the hand or in her arms. The information I got at this time was from 39 mothers Not one had had a doctor or knew any thing about the thing I talked of as—Certificate of birth. Please allow me to inform my readers that it is in the southern rural sections where you find Negro children like chickens, hatched over night. The Negroes in the southern cities are much edified, having no children at all—if any, just one or two.

The above Statistics as compiled by me for the 13 years of travel, will assure my readers that the people who are screaming about the low Negro birth, and the big Negro death rate are either poorely informed or just writing because there is ink or, or talking, to give exercise to their tongues. Every Negro death is reported from the fact that an undertaker must have a certificate of death before he can place any human under ground. With a 100% death report and a 40% birth report my readers can see at once why the U. S. government statistician has defective information to furnish the inqurning public.

My reader will not have to go south to find all the Negro children born without a certificate of birth. I will now refer you to the Negro city hospital of Kansas City, Mo. Iwas for 6 years the record clerk of this city institution. One of the most provoking things with which I had to deal was to see that the (local office in Kansas City bureau of vital statistics) got their reports from the Negro children born in said city institution. Quite a few of the interns were dialect as to filling out these birth certificates. At one time there were 8 births in three days. I asked the intern on obstitrics for these birth certificates over and over (for the maxium 10 days allowed by the bureau for these reports to be in their office), not getting said reports, I called in one of the city doctors, Dr. L. M. Tillman and got him to visit the mothers on the ward and fill out these birth certificates. The intern who is now a practicing physician in Kansas City, refuses to speak to me when he meets me, because I insisted upon his filling out his reports. I called the superintendents' attention to the trouble I was having along this line. I received poor results from my complaint to the superintendent, from the fact, the last 3 years of my connection with the city hospital the superintendent was a very busy man, making many lengthy trips to Oklahoma, New York and Washington, D. C. so was not able to keep the interns impressed as to the importance of the matter in question seemingly, I was the only one taking this birth certificate matter to heart. I gave it up as a bad job, the result was that there were quite a number of Negro babies left the hospital without a birth certificate.

From my 13 years of travel over these United States I am satisfied that the comforts and discomforts of the Negro living a short or a long life were on par with any other race. We find that there are more Negroes (in proportion) living over the hundred year mark than whites, proving, without question that palatial surroundings are not prima requisits for a long life.

The agitators on this Negro child birth, being so much less than the death rate, seems to me they have the cart before the horse, or they are running away with their own load. The first thing to do is to ask the officials at Washington to enforce birth certificates for every child born in the United States and that the local officials must be responsible for a report on every child that lives in their respective county. If this is done, my readers will know that the hounds have been barking up the wrong tree.

Ollie Brooks

EDITORIALS

A weekly report of the United States Public Health Service, for December 3rd, 1926, carries, as the first of a series of Health Studies of Negro Children, a study of intelligence of Negro children in Atlanta, Georgia, by Virginia Taylor Graham, Psychologist for the U. S. Public Health Service The study was made in cooperation with the Georgia State Board of Health and the Atlanta Board of Education. The Binet-Simon, Koh Block Design, Lincoln Hollow Square, and Healy Construction A tests were given to Negro children from the second to sixth grades. Such results as were secured received a most careful statistical treatment, being tested meticulously by the correlation coefficient, Kelly's regression equation for three variables, and similar standard mathematical formulas. The results are the familiar ones, altho they are classed cautiously as "behavioristic," and given without over-interpretation:

The Intelligence of Negro Children

(1) On various mental tests the Negro children, except at early ages, made averages that are lower than the averages of white children.

(2) The discrepancy in test scores between the races increases with age, after the sixth year, and becomes quite marked by the eleventh year.

(3) Variability of performance within each of the races was found, as many investigators state, to be greater than the difference between the two. The differences between the averages are reliable, however, and are constant in direction.

(4) In most instances greater variability of performance is shown among the whites than among the colored. This increased the probability of extreme cases in the former race; and since their means are generally higher, it increases the probability of superior scores. The Negro group, on the other hand, tends to hang a little closer around their lower average.

(5) On tests of special performance—nonverbal tests and specific parts of verbal scales—the Negro children seem to do better at rote and practical tests than at those that involve behavior which may roughly be described as discriminating, analytical and critical.

There seems to be little if any real disagreement between the results and conclusions of other related studies and those from the present study, though no attempt has here been made to review adequately or to analyze the complete literature that is available on this subject.

This seems sufficiently dispassionate to convince the Negro, finally, that the impressions abroad about the intelligence of his children, are sound. At least such a study takes the pains to apply the yardstick of science.

Only a few loopholes, for the still skeptical Negro remain: He may insist that camparisons with white norms are unfair unless they represent the same educational influences. The white children used for comparison were not even from Atlanta but from various parts of the country—perhaps New York, perhaps Massachusetts, very probably California, where frequesnt testing is done, but not Atlanta, where white children have educational advantages inferior to white children in northern and western states, and Negro children facilities inferior to white children in Atlanta.

Or, again, it might be objected that these little Atlanta Negro children, unaccustomed to white probers into their intelligence, except under circumstances which habitually stimulated to resistance, or subterfuge, or the strategically wise, "I don't know'm" of infantile race relations in this section, being very young, failed to grasp the scientific import of this mission and continued to play at their game of survival. One lone scientific counter to the finding that discrepancy *increased* with age, is Professor Joseph Peterson's finding that the discrepancy *decreased* with age.

As another objection, speciously made, it might be pointed out that on the Koh's test in which Negro children showed up so ridiculously, Chinese children surpassed native white (and probably Protestant) children to such a degree that Dr. Graham could draw no other conclusion than that "the Chinese apparently show a special facility in handling this type of problem." As a measure of racial difference it can be hoped that it will mean no more for Negroes, under the circumstances than it will be accepted to mean for the whites.

Moreover, as a reasonable caution, the Negroes might take at full value the explanation that in the comparison of the Atlanta Negro children with the Otis norms, the Negroes' scores are strictly empirical, while the Otis norms are partly theoretical, and "the curves somewhat straightened, and points moved in accordance with *a priori* considerations."

Taking another of the tests on which these children made poor scores,—that of "interpretations of verbal stimuli"; it might be pleaded that the reason these little Negro children confused "copper" with "copy," "pork" with "poke," "lecture" with "electric," "civil" with "silver," and defined "charity" as "something to ride in," and so on, was one connected with the surrounding dialect speech, rather than with particular innate abilities. A little Bowery boy would probably think "fort" and "fit" referred to certain familiar avenues with number designations.

Finally, the statistically brow-beaten Negro might take comfort from one of the principles of statistics themselves; that "the coefficient may be equally consistent with more than one hypothesis." A third

A very great amount of sheer commonplaceness is being solemnly passed out of that region "within the veil," under the label of Negro literature; and from the other side of it, there is even more of the overwrought sentimentality which, it is thought, the moment demands. While all this is encouraging in respect to the general state of public concern on the life and thoughts of Negroes, there is danger that the alloys will accomplish more harm than the real can accomplish benefits.

RACE GROUP TO DECREASE IN TEN YEARS

Professor Says Death List Leads Births

New York.—Basing his assumption on the fact that relatively the Race population has been decreasing for 20 years in the United States, Prof. Frank H. Hankins of the department of sociology of Smith college said that in time the Race population of the country bids fair to disappear.

Prof. Hankins made this prophesy at a luncheon recently at the Hotel Woodstock before members of the conference on immigration policy during a discussion of the national origins clause of the present immigration law. Max F. Kohler, a lawyer who for several years has been interested in immigration, asked Prof. Hankins, who had spoken in favor of the national origins plan under the quota law, if the restriction of immigration had not resulted in such a lack of labor that the Race population was spreading in the North in a manner that increased the problem of the Race.

"The Negro population in the northern industrial centers and cities does not reproduce itself," Prof. Hankins said. "As he comes in contact with hardier stocks and in the more strenuous life of the city and industrial community as compared to the smaller communities in the South there is a high death rate and an apparent loss of fecundity among the Negroes.

"Relatively, the Negro has been on the decrease in population for 20 years. Between the years 1910 and 1920 the Negro population increased only 650,000, while the rest of the population, leaving out immigration, increased at the rate of a million and a half a year.

DEFINITE DECREASE SEEN BY 1935

"By 1935, according to present indications, I believe the Negro population of the United States will be decreasing absolutely, and I think that this will go on as a separate population until the Negro will have ceased to be a factor of importance."

Prof. Hankins said that following the war there had been a tendency on the part of some people to ridicule the army tests, but that in the 10 years since they had been made more elaborate tests had proved that the army tests had been sound and practical.

"We don't want to be concerned about anyone rejected," he said, "who might be mentally qualified to enter. Our concern is only that we get the best of whatever race. I would rather have 50,000 high grade Chinese than 50,000 who were just English or Irish or Scotch."

NOT AN ASYLUM FOR ALL PEOPLES

In discussing the quota law and the national origins clause the speakers said it tended to cut down Germans people from the Scandinavian countries and the Irish Free State, and increased the quota from Ireland Scotland and Great Britain. The problem of reduction was difficult, he said, in order that all groups of nationals should be satisfied.

"We can't pretend any longer to be an asylum for all the people of the world. If that policy was continued we would have to let all the bars down and the result would be such numbers that the standard of living in this country would fall to the level that prevails in some foreign countries, some of them overpopulated now. Italy is an example of this, where Mussolini demands that every man marry, yet in Italy the standards are so low that it is impossible to support families properly."

"I don't wonder that an Irishman disapproves of the mental tests," Prof. Hankins said. Reading from statistics he continued: "In the army tests Ireland ranked ninth. In another test in which 10 nationals were considered Ireland ranked seventh and in another in which 12 were classified Ireland ranked sixth, so that on the whole the Irish have not stood so well."

Speaking of other nationals Prof. Hankins said it had been utterly impossible to devise tests in which our native stocks surpassed the Japanese

Health - 1927

General.

NEW YORK
GRAPHIC

AUG 23 1927

Our High Death Rate

In spite of all (or is it because of?) efforts to save life and prevent disease, the death rate in this country last year was much higher than the year previous.

This higher death rate affected both infants and adults.

All nationalities are affected, but the negro most of all.

Poverty and lack of sanitation are often urged as chief causes of a high death rate.

But, strange to say, the negro death rate was lowest in the South, where the negro is poorest and his sanitary conditions worst.

The life expectancy of the American negro is now given at about 46.9 years, as compared to about 55 years for whites.

One great cause of a high death rate is great meat consumption.

Prof. Hinhede tells us, "I have not been able to find, in all my studies, one single class or nation of people who live on a high meat diet who have a low death rate. The low death rate is always to be found among people who live on Spartan food."

In 1923 Prof. Hinhede wrote:—

"Twenty-eight years ago a hundred families bought a piece of land at Oraincuburg, twenty miles north of Berlin, and parceled it out in lots of two-thirds acres. These people are nearly all vegetarians. Their slogan is 'Away from the towns, away from artificial culture, back to nature, live in the sunshine and fresh air, support yourself as much as possible from the products of your own garden.' Throughout the war they had plenty of nourishment. The mortality of children under one year is only 25 per cent. of that of the children of the neighboring towns; and in all that twenty-eight years NOT ONE CHILD OF SCHOOL AGE HAS DIED."

He tells us that in this colony "good health is the rule."

These people eat very little animal foods, including milk and eggs, but consume whole grain breads exclusively and "there is the greatest plenty of fruits, vegetables and potatoes" in their diet.

This example should serve as a lesson for us.

Our death rate climbs upward.

Our children die in vast numbers.

Our efforts to create artificial immunity prove fruitless.

If our children do not die, they are often not healthy.

They are fed too much.

They are fed too much meat, eggs and milk.

They are fed too much denatured foods—white bread, cakes, pastries, degerminated corn bread, polished rice, candy, soda fountain drinks, etc.

Adults use too much of these also.

Dietary reform is one of the greatest needs of America today.

The negro death rate is highest among those negroes who have the most to eat—who have left the farm and its garden and come to town.

There is a lesson for us in these facts.

Negro Death Rate Shows Big Decrease

Elks Vote $5000 To Commission To Study Condition Of The Race

New York, Aug. 29 Are Negro health conditions, as far as sanitation and housing are concerned, at their lowest stage?

The published statement in the affirmative by Dr. William J. Thompkins of Kansas City, Mo., Chairman of the Infant Mortality Commission of the Improved Benevolent, Protective Order of Elks of the World, has provoked a discussion in which other members of the commission and local physicians of the race disagree.

Among those of the commission to assert that Negro health conditions are improving are Dr. Algernon B. Jackson, Director of the Department of Public Health, Howard University; Dr. Charles B. Fisher, instructor in physiology, Howard University Medical School, and Charles B. Hall, a statistician in the United States Bureau Census, Washington.

Death Rate an Issue

Members of the commission also take issue with the Chairman's statement that the death rate among Negroes from tuberculosis is seven times that of whites. They say there are no records of vital statistics to substantiate such a charge and the assertion is an exaggeration.

All members of the commission agree that the infant mortality rate among Negroes is twice that of whites, and the suicide rate of the race is much higher than among whites.

"But no such conclusions were reached by the commission that Negro health conditions, so far as relating to sanitation and housing, are growing from bad to worse," Dr. Fisher explained. On the contrary, they are improving. This fact is borne out by Dr. Louis I. Dublin, statistician for the Metropolitan Life Insurance Company, which has on its books one-fifth of the Negro population of the United States.

Mortality on Decrease

"In an article for September in the American Mercury entitled: 'Life, Death and the Negro,' he writes: 'In comparison with a death rate of thirty-five to forty per one thousand in Reconstruction Days, the Negro mortality is now only about seventeen per one thousand, a death rate about the same as the rate for a number of European countries before the World War. The recent gains in the average length of life are entirely commensurate with those of the white population. This fact alone holds out great promise for the future of the Negro in America.'"

Dr. Algernon B. Jackson, a frequent contributor to the New York Medical Journal, points out:

"Conservative students of public health conditions in America are not alarmed by the present mortality rate among Negroes. Strictly speaking, health cannot be considered in terms of race, but rather in terms of economics, environment and education. Scientists today are generally agreed that there is no such thing as true racial immunity or racial susceptibility to disease, except in a relative sense."

At the closing of the Improved Benevolent and Protective Order of Elks of the World, in New Mother A. M. E. Zion Church, No. 140 West 137th Street, Saturday night, the delegates

(Continued on page 6)

(Continued from page 1)

voted to the commission $5,000 to conduct further study of the subject.

Grand Exalted Ruler Wilson was unanimously re-elected after all of his opponents withdrew, among them Jackson Steele who was reluctant to do so. His friends saw the uselessness of his contentions. The other officers were re-elected.

The next Grand Lodge will be held in Chicago.

The Taylor organization in this state was recognized.

Mr. Chas. E. Fort, one of the oldest members of Weldon Lodge was made deputy.

ELMIRA, N. Y.
Star
SEP 30 1927

Why Negroes Dying Faster

In a recent consideration of morality rates in the United States a prominent physician analyzed the particularly high rates existing among negroes.

In 1920 there were 10,463,131 negroes in the United States, constituting almost 10 per cent. of the population. The death rates in general are decreasing, but for a while were so much higher than those of the white race that the negro population is only one-half in proportion to the whites of what it was a century ago.

At birth a negro child has 14 years less expectancy of life than a white child; at 32 years, seven years less, and at 62 years, two years less. One of the reasons why negroes die faster than do whites is a lessened physical strength and resistance.

It must be remembered that they are a transplanted people living under conditions different from those under which the race grew. They have had, furthermore, less opportunity for education, less knowledge of sanitation and disease prevention.

Among the diseases which occur most frequently in the negro race are tuberculosis and diseases of the kidneys and lungs.

The murder rate is six times that of the whites. The diseases which seem to affect the negroes less than the whites are nervous disturbances, eye troubles and skin diseases. Their suicide rate is, moreover, about one-third that of the white race.

Because of their increased rate of mortality and their lessened life expectancy, they usually are forced to pay higher insurance rates than do white people.

TIMES
New York

AUG 7 1927

Negro Child's Vitality Lower.

Observations made not long ago of 1,564 white and 1,254 negro children living in the same county in Tennessee, to ascertain the relative vital capacity, that is, the air capacity of the lungs, showed that in the groups examined the vital capacity of the negro child was generally lower than that of the white child of the same age, body weight and standing height.

POST
WASHINGTON, D. C.

SEP 11 1927

COLORED CATHOLICS AND ELKS ARRANGE HEALTH PROGRAMS

Joint Parade Planned Friday to Focus Attention on Mortality Conditions.

LODGE SETS ASIDE $5,000 FOR SURVEY PURPOSES

Eight Race Hospitals in U. S. Found Insufficient to Meet Needs.

Interest in the health programs of the Federated Colored Catholics of the United States and the negro Elks, as outlined at their recent conventions in New York, was evidenced last night in the announcement by officials of both organizations of a joint demonstration in the interest of the publicity features of these programs, to be held Friday night at the Lincoln colonnade.

The Knights of St. John and Catholic auxiliaries, the marching clubs of Morning Star and Columbia Elk Lodges, Forest and Columbia Temples, will parade to the hall, the procession to be featured by the presence of officers of the grand lodge and grand temple of Elks, J. Finley Wilson, grand exalted ruler, and Ella G. Berry, grand-daughter ruler, and Col. De Reef Holton, commander of the Knights of St. John.

Attention of Elk organizations to negro health conditions was attracted first by a survey made by Charles E. Hall, statistician of the Census Bureau, a year ago, in which he showed an alarming condition of infant mortality among negroes in all sections of the country. A commission was appointed by the grand lodge of colored Elks, whose report of a nation-wide survey was made at the recent New York session by Dr. W. B. Thompkins, of Kansas City, Mo.; Dr. Charles B. Fisher and Dr. Algernon B. Jackson.

$5,000 Fund Set Aside.

The grand lodge set aside a fund of $5,000 for further surveys and dissemination of health information throughout neglected areas. The program comprehended organization of colored physicians in various localities, a careful record of births by city health departments, representation of negroes on city health boards, ample hospital facilities, extension of sewer systems, paving of streets and sidewalks in colored districts, regulation of garbage collections, and better housing in general.

Investigation has revealed that there are only eight colored hospitals in the United States approved by the American Medical Association to train internes in the care of more than 10,000,000 negroes when they require hospitalization. They include the Freedmen's Hospital, Kansas City General Hospital, St. Louis City Hospital, George W. Hubbard Hospital of Nashville, Mercy Hospital and Fred Douglass Memorial Hospital of Philadelphia, the John A. Andrew Memorial Hospital of Tuskegee, and the Provident Hospital and Training School, Chicago.

The Federated Colored Catholics of the United States were attracted to the health program by negro conditions in St. Marys County—Southern Maryland, said to be the worst in America. The Cardinal Gibbons Institute, nonsectarian, was established there several years ago, with the purpose of combating the health conditions.

Forces Are Joined.

The federation, in seeking cooperation of all organizations in its endeavor to establish educational and recreational facilities at the institute, has discovered close similarity of its endeavors with those of the fraternal organization.

To focus attention on health conditions, and develop community cooperation in their eradication, the demonstration at the Lincoln Colonnade next Friday night was planned, Dr. Fisher stated yesterday. Further joint demonstrations later in the year in the interest of Cardinal Gibbons Institute have been planned, according to A. C. Monahan and Eugene A. Clark, assistant superintendents of public schools.

Close cooperation between the Catholic and other organizations was indicated yesterday in statements by Frank A. Lewis and Herbert Jones, exalted rulers of Morning Star and Columbia lodges of negro Elks; by Marie M. Marshall, of Columbia temple, and by George B. Hunt and Thomas P. Green, commanders of the fraternal marching clubs, who cancelled a joint outing to participate in the colonnade demonstration.

SURVEY REVEALS HIGH DEATH RATE

In his weekly bulletin on Chicago's health, Dr. Herman N. Bundesen, commissioner of health, makes public the results of a health survey of the colored population of the city. The conditions shown by the survey in the commissioner's opinion disclose a situation which justifies vigorous and immediate corrective measures.

The health survey was directed by Dr. H. Llewellyn Harris, Jr. Dr. Harris made a very detailed study of conditions on the south side and in the other communities with a large colored population, and when he had completed his study he submitted an exhaustive and well written report setting forth clearly the conditions as he found them and suggesting proper remedies. He was assisted in the survey by an advisory committee made up of eminently able, fair minded, and representative citizens, under the chairmanship of Dr. I. S. Falk.

Dr. Harris

Urges Action

"Negro health conditions will be improved in Chicago and elsewhere not by denying but by honestly facing the facts and taking the corrective measures which the facts demand" Dr. Bundesen says in his bulletin.

"The Negro death rate is twice that of the city as a whole," he continues. "The rates, figured on a population of 3,048,000 total, and 160,000 Negro, population for 1926 are 11.68 per 1,000 for entire city and 22.8 per 1,000 for the Negro population.

"Infant mortality for the entire city was 64.6 per 1,000 while that for Negroes was 94.7 per 1,000. The largest losses of life among Negroes are from highly preventable diseases and comparative rates were: Tuberculosis, white 53.5; black, 348.5; and pneumonia, white 88.8; black, 114.7.

Lack Health Agencies

"The communities in which Negroes live in largest numbers, are poor in health-serving agencies The deartment of health will act to remedy this condition.

The work of contagious disease control in the public schools shows a wide variation in efficiency. Closer supervision seems necessary. There is also urgent need for more extensive correction of defects for positive health teaching and for an extension of facilities for the care of the school child."

BULLETIN

Bloomington, Ill
SEP 27 1927

Health and How to Keep It

By Dr. Morris Fishbein
Editor, Journal of the American Medical association and of Hygeia, health magazine

MANY FACTORS ENTER INTO HIGH NEGRO DEATH RATE

In a recent consideration of mortality rates in the United States a prominent physician analyzed the particularly high rate existing among negroes.

In 1920 there were 10,463,131 negroes in the United States, constituting almost 10 per cent of the population. The death rates in general are decreasing, but for a while were so much higher than those of the white race that the negro population is only one-half in proportion to the whites of what it was a century ago.

At birth a negro child has 14 years less expectancy of life than a white child; at 32 years, seven years less, and at 62 years, two years less. One of the reasons why negroes die faster than do whites is a lessened physical strength and resistance.

It must be remembered that they are a transplanted people living under conditions different from those under which the race grew. They have had, furthermore, less opportunity for education, less knowledge of sanitation and disease prevention.

Among the diseases which occur most frequently in the negro race are tuberculosis and diseases of the kidneys and lungs.

The murder rate is six times that of the whites. The diseases which seem to affect the negroes less than the whites are nervous disturbances, eye troubles and skin diseases. Their suicide rate is, moreover, about one-third that of the white race.

Because of their increased rate of mortality and their lessened life expectancy, they usually are forced to pay higher insurance rates than do white people.

Health - 1927 General.

BROOKLYN CITIZEN
SEP 4 1927
HEALTH OF NEGROES.

Why do insurance companies consider negroes bad risks? Statements that they do so consider them, made some time ago, caused the Improved Benevolent Order of Elks of the World, a negro organization, to make a survey of the United States. A report, based on statements from more than 400 cities throughout the country, reveals a deplorable condition of affairs. It was presented at the annual convention of the organization held in Manhattan.

The report was prepared by Dr. William J. Thompkins, Assistant Commissioner of Health of Kansas City, who is said to be the only negro health official in the country. To more than 700 cities letters of inquiry were sent and a majority of the letters were answered. The report, it is stated, has excited interest among national and State health officials and insurance companies, and the American Public Health Association, it is stated has offered assistance, including financial aid, in preparing and distributing the report.

Health conditions among the negroes, it is found, are generally worse than they have ever been in the history of the country. This is attributed to failure of landlords to properly care for their tenants, who must live in poorly constructed houses without proper sanitation. There has been no health inspection in some negro sections for years, and in some localities bathtubs are unknown. Pool rooms, lunch rooms and barber shops are said to be centers of disease, because of lack of ventilation and health inspection.

In only 24 cities in 143 are negroes represented in health departments. Forty-three of the cities had no hospital facilities for negroes, and thirty-three reported acute housing conditions.

The chief causes of death among negroes are reported to be tuberculosis, pneumonia and whooping cough. Of 154,000 deaths last year 40,000 were attributed to tuberculosis. At least one-third of the 40,000 died, it is stated, because of improper enforcement of sanitary laws. The percentage of negroes dying of tuberculosis is four times as great as among whites, few States providing care for negroes suffering from the disease.

The whole report should be read, and with great care, by all thoughtful people. The negro has evidently been neglected throughout the country. It is not only the health of the race that is imperilled by this neglect, it may be said, but that of the white man as well. If a disease like tuberculosis sweeps over a negro community of any size it must inevitably cross the line to their white neighbors, and the health of the whole city or town is endangered.

For their own sake, and for the sake of their wives and children, if not for humanity's sake, the white people, who are in the majority in nearly every State in the Union, should take this matter up with energy and see to it that housing conditions for the neglected race are improved, that health officials are quickened in their work, that hospitals and other accomodations are furnished for the sick and that in general the untoward conditions reported are improved.

HEALTH TOPICS

By DR. M. ALICE ASSERSON
Of the New York Tuberculosis and Health Association

Good News for Mothers

Every mother knows that with each day there comes a full program of routine tasks. Meals to plan, regular household duties to perform and sometimes emergencies to meet.

A real help is offered to mothers by the National Federation of Day Nurseries in the form of a booklet called "Every Childs' Dietary for Mothers and Children," recently published by the Federation. It was prepared by Miss Pearl Shackelford, Nutrition Advisor, New York Tuberculosis and Health Association, together with Mrs. Hermann M. Biggs, President of the Federation.

The book contains suggegsted menus for children of different ages, recipes of good, wholesome dishes for growing children and advice about the best times to serve meals to children. Mothers will find it of real assistance in making easier the task of good meal planning. As diet plays an important part in the health and proper development of children, all thoughtful parents are trying to learn as much as possible concerning food values, in order to give their children a wholesome, nourishing, well-balanced diet.

They will find in "Every Child's Dietary for Mothers and Children" many practical and helpful suggestions. Copies may be obtained at 25 cents apiece from the National Federation of Day Nurseries, Room 907, 105 East Twenty-second Street, New York City.

TIMES
AUG 27 1927

HEALTH OF NEGROES ALARMS THEIR ELKS

Reports From 400 Cities Show Situation to Be the Worst in the Country's History.

POOR HOUSING IS BLAMED

Lack of Sanitary Inspections and Ignorance of Public Officials Also Scored by Order.

A health report based on statements from more than 400 cities throughout the country was the chief matter of business before yesterday's session of the annual convention of the Improved Benevolent Protective Order of Elks of the World, a negro organization, meeting at Zion A. M. E. Church, 140 West 137th Street. The presentation of the report was preceded by the election of minor officers.

The report was prepared by a committee of eleven, headed by Dr. William J. Thompkins, Assistant Commissioner of Health, Kansas City, Mo., who, it was said, is the only negro health official in the United States. The survey was begun last year after statements had been made about the unhealthy condition of negroes, which made insurance companies consider them bad risks. To date a few more than 400 of the 700 cities to which questionnaires were sent have replied.

According to Dr. Thompkins, the report has excited interest among national and State health officials and insurance companies. The American Public Health Association, it was said, has offered assistance, including financial aid, in preparing and distributing the report.

Finds Conditions at Worst.

According to the report, negro health conditions generally are worse than they have ever been in the history of the country. This is attributed to failure of landlords properly to care for their tenants, who must live in poorly constructed houses without proper sanitation. It is charged that Boards of Education and most public health officials are ignorant of the negro problem and have no program for the betterment of the race.

There has been no health inspection in some negro sections for years and in some localities bathtubs are unknown, the report said. Pool rooms, lunch rooms and barber shops were said to be centres of disease because of lack of ventilation and health inspection.

Replying to a statement that the negro birth rate is falling off, the report declared that at least 25 per cent. of negro births are not registered. Principally due to the birth rate and the increase of births over deaths, the report said, the negro population of the United States had increased considerably.

Infant mortality in cities of 25,000 population or more, in 1919 was 131 per 1,000; in 1924 it had dropped to 113 per 1,000. According to last census reports, the report said, nineteen negro babies are born every hour. Of that number two die and during the same hour thirteen adults die. Causes of death were given as ignorance, malnutrition and economic and living conditions. Illegitimate negro births, it was said, are nine times as great in number, as illegitimate white births. It was urged that steps be taken for the moral protection of negro women.

Many Cities Lack Hospitals.

In only twenty-four cities in 143 it was found that negroes are represented in health departments. Forty-three of the cities had no hospital facilities for negroes and thirty-three reported acute housing conditions.

The chief causes of death among negroes were given as tuberculosis, pneumonia and whooping cough. Of 154,000 deaths last year, 40,000 were attributed to tuberculosis. At least one-third of the 40,000 died because of improper enforcement of sanitary laws, the report alleged. The percentage of negroes dying of tuberculosis is four time as great as among whites, it was said, only few States providing care for negroes suffering with the disease.

"In fact," the report charged, "today the negroes haven't the first semblance of a chance for their lives in most sections of the country."

From 1911 to 1923, the report said, the death rate among negroes from tuberculosis has been reduced 41 per cent.

The general death rate is greater, it was declared, in Southern cities than in Northern cities. The average for thirty-three Northern cities was said to be 21.1 in 1,000, while in twenty-four Southern cities the average is 29.6 in 1,000. The lowest rate is in Forth Worth, Texas, and is 10.1 in 1,000. The highest rate is 20.33 in Mobile, Ala. New York's rate is 11.8 in 1,000 and Kansas City, only city with a negro health official has a rate of 13.5 in 1,000.

Negroes have a better chance of life in rural districts, the report held, the excess in birth over deaths being 6.3 in 1,000 greater than in cities.

According to the mortality table the death rate among insured negroes in 1911 was 17.5 in 1,000; in 1923 it had dropped to 14.5 in 1,000, or 17.3 per cent., showing, according to the report, that negro men had increased their life span six years, women having increased their life span five years.

Homicide Ratio Large.

Homicide among negroes is eight times as great as among the whites it was said. This condition was attributed to living conditions. Better living conditions would result in a lessening of criminal tendencies, the report held.

Following the reading of the report, recommendations were adopted to urge legislation in the States to force landlords to furnish better homes and to re-establish the war time practice of segregating disease carriers, especially in public schools. It was decided to establish baby health stations in negro communities with physicians who are members of the order in charge. All, as Elks, were urged to cooperate in bettering civic, social and sanitary conditions in negro communities.

A spirited debate preceded the selection of Chicago for the 1928 national convention. Delegates from Detroit insisted on having the convention, but were outvoted. The convention adjourned until 7 P. M., when business matters were taken up. The final session will be held today.

High Negro Mortality

By JOHN A. DIAZ, Ph.D.

THE NEGRO, having been taken from his homeland and brought to America for exploitation, has been under the erroneous impression that the "civilized" country is contributing materially to his physical betterment, as it is to his social and economic improvement. But there is nothing further from the truth. The Negro has so deteriorated physically that his life expectancy is only 40.9 years! And this estimate is conservative, for it was made by the Metropolitan Life Insurance Company.

How about the thousands who cannot afford to take an insurance policy and the thousands that fail to pass the tests? Moreover, these tests are not reliable. They are based on certain fallacies which are devoid of any scientific foundation. It is well known that many who passed in these tests as being sound and in good health die within six months, a year or two years after passing such examinations.

To say that the life expectancy of the Negro is about thirty-six years is no exaggeration. In fact, there is no way of definitely fixing the life expectancy of any race of people. But we take the life insurance companies' figures as a guide.

To solve the health problem of the Negro, what is needed is not statistics, which would tell what happens, but which cannot remove the cause. The great need is education in natural hygiene, biologic living, and physical culture. The information he gets in the school is spurious. Of course, white people are also victims of the propaganda of a certain branch of medical science, namely, the drug and serum manufacturers, and newspaper editors and leaders, both white and colored, swallow the theory about the immmunity from germs by vaccination and other serums.

Efforts should be made to teach the child natural hygiene as expounded by the world's greatest authorities in medicine, surgery, physiology and dietetics, in order to make him (except in case of accident) independent of dentists and physicians and build a sturdy body that would resist the invasion of germs. A healthy body is the only immunity against disease.

The Negro race is seriously lacking in natural hygienists. I do not know of one prominent Negro exponent of natural, biological living and physical culture.

The white American has his Dr. John Harvey Kellogg, Bernarr Macfadden, Alfred W. McCann, Milo Hastings, Dr. Benedict Lust, Dr. Herbert Shelton and scores of other exponents of natural hygiene, biologic living and physical culture, and therefore a large percentage of the whites is benefited while only a small percentage of the Negroes is interested in health culture. The fault lies at the doors of their so-called leaders and educators. As a result, the Negro is still superstitious about diseases and its causes and is relying on fake patent medicines, herbs, voodooism and liquor to relieve him of his diseased condition. No wonder heart disease, Bright's disease, tuberculosis, rheumatism, stomach troubles, diabetes, cancer and other chronic diseases are so prevalent. Unwise treatment of the common ailments is responsible for these chronic diseases.

Health is the result of natural biologic living, living in accord with the laws of human physiology. To do this does not require privation, hardship or denial of wholesome pleasures. On the contrary, it is to exchange gross, artificial and injurious tastes by natural desires and appetites.

Dr. John Harvey Kellogg, medical student, author of several books on natural hygiene, and superintendent of the famous Battle Creek Sanitarium, said on the editorial page of the New York World, December 21, 1926:

"The intelligence of the world shoud be set to work to multiply existing agencies and to create new agencies for the betterment of the race. A biologic survey should be made of every civilized community and of savage communities as well, for the purpose of comparison. The laws of eugenics and euthenics should be taught in every school and preached from every pulpit. Every teacher, every leader of human thought, every publisher, all professions, all serious-minded men and women, should join in making known to every human being in every corner of the globe the fact that the human race is dying, and co-operate in seeeking to discover and apply the remedies necessary for salvation from this dismal fate."

If this can be so aptly said of the white race, what of the Negro race, a down-trodden race, whose economic condition, superstition and religious foundation predispose it to the grave maladies of humanity?

A New York City examination of the mortality returns for the year 1925 for certain causes for white and Negro reveals a relatively higher rate for Negroes in pulmonary tuberculosis, pneumoria, heart diseases, Bright's disease and nephritis. In other large cities the situation is worse, for the Negroes live under shockingly unsanitary, unhygienic conditions.

According to "Mortality Statistics—1924," the death rate among Negroes is increasing.

The following are the specific causes of the Negro's high death rate and the prevalence of the graver maladies:

A diet of pork chops, putrified, decomposed meats, "hot dogs," candies made with refined, demineralized sugars, pastries, white flour products (hot biscuits, etc.), gravies, pies, cakes, ice cream, peppér, salt, spices and other condiments. Such a diet would make a stomachless man sick.

Pernicious, fake patent medicines, voodoo medicines and other fake remedies.

Lack of proper exercise, lack of ventilation in sleeping room, the Negro being such a lover of warmth.

Wearing too much clothing.

Ignorance, superstition, fatalism, religious fanaticism, alcoholism.

Low grade, highly emotional amusements.

Economic, environmental and educational conditions.

It may be said that the white people also indulge in these wrong habits of living. But do they escape the consequences? Indeed they do not; but their economic, environmental and educational advantages make them better risks than Negroes.

To prove that the unnatural, unbiological living of modern civilization is the sole cause of the Negro's high death rate we can cite cancer, a disease prevalent among Negroes of civilized countries, but unknown among the primitive Negroes of Africa, who are affected with this grave malady only when aping the white European's mode of living. Medical scientists of today maintain that what causes cancer causes the other grave maladies which are on the increase,

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TIMES
ROANOKE, VA.
AUG 29 1927

TUBERCULOSIS AND THE NEGRO

Serious attention must be given by the whole country to a report made at a meeting of the negro order of Elks in New York City last week For the study of the health conditions of the colored people of the United States was based on reports from more than 400 cities and towns of this country. The relations between the races are too intimate for any one not to be concerned in the conditions here shown. No man liveth to himself. The colored people come into our homes, our stores, our places of business. The contacts are of a kind that cannot be avoided.

The report has already excited interest among national and state health officials and insurance companies. The American Public Health Association has tendered its assistance, including financial aid in the preparation of a detailed report on the subject and its general publication.

For the report to the colored Elks showed negro health conditions generally worse than they have ever been in the history of the country. The condition is attributed generally to poor housing conditions and lack of proper sanitation, especially in the larger cities, to which negroes in large numbers have been crowding in recent years. The appalling infant mortality is attributed to ignorance, malnutrition and poor living conditions.

The chief cause of deaths among the negroes were given as tuberculosis, pneumonia and whooping cough. Of 154,000 deaths last year in the cities of which records were available, 40,000 were attributed to tuberculosis. The percentage of negroes dying of tuberculosis was given as four times as great as among whites. It may be remarked in this connection that Virginia is among the foremost states of the Union in attacking this problem. The state tuberculosis hospital for negroes at Burkeville, known as Piedmont Sanitarium, is achieveing results in the treatment and cure of this disease that merit national recognition, just as Virginia's institution for the treatment and care of the negro insane—the Central State Hospital at Petersburg—has long been regarded as one of the foremost in the country in the value of the results achieved.

Health officers have long recognized a peculiar distinction, the cause of which is not entirely apparent. Negroes are less susceptible to the whole realm of fevers which are the white man's deadly enemy. They seem less susceptible than the white man to cancer. But in all diseases of the respitory system—influenza, pneumonia, bronchitis and tuberculosis, the mortality of the colored race is usually much greater than that of the white.

There is a field here for real scientific investigation and for substantial and beneficial public service. If the negro who moves from the open air life of the farm to the overcrowded tenement of the large city is to become the victim of disease, it would appear that there is a new argument and a new meaning to the "back to the farm" movement. Even in cities of lesser size, the report challenges attention and demands a new survey of housing and sanitary conditions. Good municipal housekeeping cannot tolerate any condition that spreads disease among any element of the population.

Health - 1927

General.

VIRGINIAN-PILOT
NORFOLK, VA.
JUL 31 1927

Typhoid Treatment For Colored Folk Strongly Urged

Appeal Presented By Welfare Director To Public To Use Clinic Service

Three instances of typhoid fever occurring in one negro family during the last few days of the month tended to spoil what otherwise would have been, in the opinion of health officials, an unusually low record of diseases for a city of the size of Portsmouth.

Three cases of typhoid fever previously had been reported, one in April and two in June, all of which were traced to out-of-town contagion. Of these three cases two were negroes.

Records in the office of Dr. L. J. Roper, director of the Department of Public Welfare, show that in July there were only three cases of measles and two cases of scarlet fever in addition to the recently reported cases of typhoid fever.

Dr. Roper yesterday issued an urgent appeal to colored people to report to the city clinics, held Monday and Thursday afternoons from 3 to 4 o'clock, Saturday mornings from 10 to 11 o'clock and Thursday nights at 513 Middle street, for inoculations to make them immune to the typhus germs. The aid of white people in getting colored men, women and children to take the immunization treatments has been asked by Dr. Roper, who states that the disease never can be stamped out entirely in Portsmouth until the colored population has been educated to the effectiveness of the inoculations.

More than 90 per cent of the cases of typhoid fever in Portsmouth, Dr Roper said, occur among negroes and their infection not only prevents the city from ever attaining complete freedom from the disease, but endangers the lives of colored people with whom the typhoid victims come in contact Some of the negroes, Dr. Roper states have co-operated in the drive against typhoid fever, but a great many colored people, who do not read the papers and do not come in contact with the health officers, are not fully acquainted with the advantages offered by the city clinics.

Dr. Roper has urged on colored men and women the facts that the immunization treatments are free, are absolutely safe and given over a period of three weeks, and that they are effective in every case.

The SLAUGHTER OF THE INNOCENTS

By Algernon B. Jackson, M. D., Howard University, Department of Health,

(For The Associated Negro Press)

The story of infant mortality among Negroes is a tale of the great Amercan tragedy. The blood of these innocents stains the hands of each and every American citiben black and white alike. The death rate of white infants is too high and all out of keeping with our boasted civilization, but the wide difference between the rates of whites and Negroes, spells a tale of neglect, ignorance, indifference, and poverty which ought to make every genuine American citizen stop and ask himself how well is he serving his fellowman, and how much is he his brother's keeper.

Figures are usually tiresome, but they have a vivid way of setting forth certain facts. The last Census report shows infant death rate per 1,000 births the whites had 66.8 and colored 114.1. Still births per 100 live births for whites there were 3.6 and for colored 7.6 This report covers the registration area of the United States. Unquestionably the greater per cent of illegitimate births among Negroes than among whites does much to increase the infant mortality within the race group. For the whole white population there were 22,966 illegimate births with the terrible showing among Negroes of 18,991, despite the fact that they make up about only one tenth of the national popualion. Stillbirths among these illegitimates show for white 1,545 and among colored 2,152. The death rate among Negro infants during their first month of life is higher than among any other race group in America. It is worth while considering what part the high rate of illegitimacy plays in this.

Ignorance, poverty, superstition, fatalism and indifference all play their part in this awful slaughter of the innocents, and it is the business of everyone among our race who has an ounce of sense and a grain of race loyalty to take it upon himself to help relieve this situation. The Elks are undertaking a study of conditions with the hope of improving them, but you do not have to be an Elk to lend your hand and heart to this great human cause. These little children must be saved and given a chance to live out their span, if the Negro race expects to go forward in progress and accomplishment.

LENGTHENING THE SPAN OF LIFE

The average span of life in America today is about 60 years. Within this century it should increase by ten years, according to Edward Alsworth Ross, noted sociologist and editor of the American Journal of Sociology. Writing in the August issue of Century Magazine, Dr. Ross says that at the present rate of progress, science will have virtually eradicated communicable disease, with the probable result that people, "of the more enlightened countries, at least," will achieve an average normal life of 70 years.

Dr. Ross's conclusions, as presented in the article, were arrived at after a world-wide survey of current activities in medicine and hygiene. He finds a movement toward health and longevity similar to that in America evident the world over.

The average expectancy of life in America, according to Dr. Ross, has risen from 50 years in 1901 to 60 years today. Infant mortality has been reduced from one death in four births to one in fourteen within the last half century.

Each of the major diseases feared by man in the past—tuberculosis, malaria, yellow fever, diphtheria, bubonic plague and others—has been largely conquered by medical science. Discussing each of these, Dr. Ross says that "already most of these furies are chained and the prospect is bright that within a lifetime all the chief mass-slayers will be laid low." As a result of our increasing longevity, he declares, the race of the future must curb its birth rate or face a serious problem of overpopulation.

Predictions similar to that of Dr. Ross have been made recently by other authorities. The prospects are that our average span of life shall continue to increase steadily. Incidentally, it will not be so long as a century, or even a lifetime, before some of the major diseases he mentions will have been eradicated, if we may accept the word of numbers of authorities in various scientific fields.

NATIONAL HEALTH COUNCIL.

Dr. Snow Recounts Origin and Scope of the Organization.

For nearly twenty years prior to 1921 leading public health administrators and sanitarians had advocated the desirability of some national clearing house for voluntary health agencies. As a culmination of these endeavors and several surveys of voluntary health work, the National Health Council was organized and began to function on Jan. 1 of that year, says William F. Snow, M. D., its President, in The American Red Cross. A formal conference on the subject had been held in 1913, at the call of the Council of Health and Public Instructor of the American Medical Association, which resulted in a study of the problems related to the coordination of national health activities of extra-Governmental associations.

The object of the National Health Council, as stated in its constitution, "shall be the coordination of the activities of the members of the council and such other activities for the betterment of health as may be determined." National health organizations, both oficial and non-official, are eligible for membership in accordance with the provisions of the by-laws. There are at present three categories of members, active, associate and advisory. The fourteen organizations which constitute the council are all concerned with major fields of public health work in America.

The general American public is perhaps best represented by the American Red Cross, an advisory member, which has a vital interest in public health. Professional health workers are represented by the American Public Health Association and the Conference of State and Provincial Health Authorities of North America. The interest and enterprises of the nursing profession are represented by the National Organization for Public Health Nursing. The National Government is represented by the United States Public Health Service and the United States Children's Bureau, which are also advisory members of the council. The American Child Health Association represents voluntary enterprises in the promotion of child health. The National Committee for the Prevention of Blindness represents activities in that field.

MALNUTRITION IS MENACE TO U. S. CHILDREN

Investigation Shows That One-Fourth Receive Inadequate Nourishment and Are Therefore Harmed

WASHINGTON, D. C., Aug. 3.—(Special Release) About one-fourth of the children of the United States are inadequately nourished and the total number of perfectly nourished children is surprisingly small, according to the findings of recent studies made by the United States Chidren's Bureau. In one study conduted in a rural county in Kentucky 40 per cent. of the children were classed as poor, from the point of view of nutrition, 35 per cent, as fair, 18 per cent, as good and only 7 per cent. as excelent. Even in New York City, where child care agencies exist that are unknown in the rural sections, the Bureau of Child Hygiene of the Department of Health estimatet a few years ago that 185,000 of the 1,000,000 school children at that time needed supervision and 31,000 required medical treatment.

Becoming Menace

In some communities malnutrition is said to be so common that it is not even recognized as an abnormal condition. The malnourished child is described thus by Lydia J. Roberts of the Children's Bureau:

"The animal spirits natural to all healthy young are likely to be lacking in the malnourished child; he may be listless at play and work, not caring to romp and play like other children; he is likely to tire easily, and he may be regarded as lazy. He is likely to lack mental vigor, also; to have little power of concentration and attention, and to lack the natural inquisitiveness and mental alertness of a child. He may be nervous, restless and figety, and he will probably sleep lightly and be finicky about his food."

Poverty Blamed

Why are children improperly fed? Why do they have too little sleep? Why are bad teeth and tonsils neglected? Parents are largely to blame, Miss Roberts says. Malnutrition was formerly laid chiefly to the door of poverty, but now it is seen that poverty is less important a factor than ignorance and lack of control. It has been found that an intelligent and well-trained mother can do a great deal with a minimum income. Many mothers, however, do not know what a balanced diet is, do not know that tea and coffee are not good for children, do not understand that youngsters need more sleep than adults; and often those who do know these things lack the proper control over their children.

SEES HEALTH FUNDAMENTAL TO PROGRESS

Loss Of Billions Annually Is Traced To Poor Health and Premature Deaths In U. S.

NEW YORK, Aug. 3.—The striking economic progress made in theUnited States, through the checking and control of disease and the improvement of sanitary conditions, and the possibilities of still greater progress are reflected in a statement on health and community prosperity just issued by the Insurance Department of the Chamber of Commerce of the United States.

Gain Revealed

As a measure of the annual economic loss to the country through ill-health and permature death, the statement cites estimates of $2,000,000,000 due to the first and $6,000,000,000 due to the second. At the same time, impressive economic gains are recorded through more effective control of widely prevalent diseases, such as tuberculosis, diphtheria, typhoid, influenza and pneumonia. Based on the reduction of the tuberculosis rate since 1900, an estimate of $2,000,000,000 is cited as the annual saving made in this field alone.

"The ability of a man to work," says the insurance department, "depends in large measure upon his health. Whatever reduces his earning capacity in any way reduces the assets of the community. Any decrease in earning power is naturally reflected in reduced purchasing power, with the result that every case of illness or premature death involving loss of wages has an effect upon the community. This may not be noticeable in individual cases, but the total sum is tremendous.

Seek Preventive Measures

"IT is generally known that a large proportion of all deaths occuring may be prevented through simple precautionary measures. During recent years remarkable progress has been made in decreasing fatalities from such diseases as smallpox, diphtheria, typhoid fever, tuberculosis, measles, scarlet fever, whooping cough, influenza and conditions causing the deaths of infants

"Preventive measures have at the same time reduced the number of cases of sickness from these diseases. The saving from reduced illness is not easily measured, but the number of cases reported and the time lost from work or school are fairly satisfactory standards to indicate the incidence and severity of morbidity.

Workers Lose

The cost of illness to industry has never been determined nationally but one prominent manufacturer with an annual payroll of approximately $5,000,000 estimates the total annual cost of illness to his business, including charges for idle machinery and loss in production, to be $287,500. The loss to the individuals and the community due to the illness of his employes is estimated to be $303,000 annually. This takes into consideration direct loss of wages, indirect loss of earning capacity after illness, medical and nursing expenses, public expenses and charitable relief.

Loss In Wages

"In a number of leading stores six days lost per individual each year from illness and injury proved an average experience. For a working force of 1,000 people at an average wage of $3 a day this amounts to $18,000 a year in direct wage loss alone. Industrial medical supervision at an average annual cost of several dollars per worker offers one method of reducing such losses.

"It has been stated that a baby at birth has a potential value of approximately $10,000. The total loss in prospective wealth in any community due to infant mortality can easily be ascertained. In the United States during 1924, there were 1,930,614 births representing an increase in human capital of $19,306,140,000, but in the first year of life 136,730 of these babies died, reducing the capital account by $1,367,300,000."

DEATH RATE SLASHED BY MEDICAL SCIENCE

Death Rate Per 100,000 Cut 600 in 27 Years.

WASHINGTON, July 25.—Medical science and an increased interest in the public welfare are given credit for a reduced death rate in the United States, and a very noticeable check in some dangerous diseases.

A census bureau survey shows that the death rate per 100,000 estimated population in the registration area exclusive of the Hawaiian Islands, was reduced from 1,775.0 in 1900 to 1,183.8 in 1924.

The death rate in these important diseases was greatly decreased during that 24 year period: Typhoid fever, from 35.8 to 6.7; malaria, 7.9 to 2.5; measles, 12.5 to 8.6; diptheria, 43.3 to 9.4; influenza and pneumonia, 181.5 to 76.8; tuberculosis, 151.8 to 80.2; diarrhea and enteritis, 133.2 to 31.8; cirrhosis of the liver, 12.9 to 7.4.

Among the diseases causing an increased death rate are: Cancer and other malignant tumors, from 63.6 in 1900 to 91.9 in 1924; cerebral hemorrhage and softening, embolism and thrombosis, 75.5 to 94.4; diseases of the heart, 132.1 to 178.1; appendicitis and typhlitis, 9.7 to 14.9; suicide, 11.5 to 12.2; homicide, 2.1 to 8.5.

NEGRO ELKS APPROPRIATE HUGE SUM FOR HEALTH IMPROVEMENT; NATIONWIDE STUDY IS PLANNED

Colored Fraternity To Expend $5,000 On Infant Mortality Commission—Race's High Death Rate Precipitated Heated Discussion At Recent Conclave In New York City—Movement Will Help Negro Group and Social Order.

(By The Associated Negro Press)

New York City.—One of the closing acts of the Elks 26th annual convention was the voting of $5,000 to the Infant Mortality Commission for purpose of studying health conditions, especially as regards sanitation and housing.

The action followed a discussion over a published statement by Dr. William J. Thompkins of Kansas City, Missouri, chairman of the committee, that the death rate among colored people is twice that among the whites. Other members of the commission disagreed.

Members of the commission who declared that health conditions among colored people are improving are Dr. Algernon B. Jackson of the department of public health, Howard University; Dr. Charles B. Hall, statistician in the U. S. Bureau of Census, Washington, D. C.

They declared that the change that the colored death rate from tuberculosis is seven times greater than that of the whites is an exaggeration, and that there are no substantiating records of vital statistics.

All members of the commission did agree, however, that the infant mortality rate among the colored people is twice that of the whites, and that the colored homicide rate is also much higher. Dr. Fisher declared that no conclusions were reached by the commission that colored health conditions, so far as relating to sanitation and housing are going from bad to worse. Contrawise, he stated that they are improving and offered as proof, the records of Dr. Louis I. Dublin, statistician for the Metropolitan Life Insurance Company.

Dr. Jackson said: "Conservative students of public health conditions in America are not alarmed by the present mortality rate among colored people. Strictly speaking, health cannot be considered in terms of race, but rather in terms of economics, environment and education.

"Scientists today are generally agreed that there is no such thing as true racial immunity or racial susceptibility to disease, except in a relative sense."

Health - 1927

General.

HERALD
AUGUSTA, GA.

SEP 20 1927

MANY FACTORS ENTER INTO HIGH NEGRO DEATH RATE

BY DR. MORRIS FISHBEIN
Editor Journal of the American Medical Association and of Hygeia, the Health Magazine

In a recent consideration of mortality rates in the United States a prominent physician analyzed the particularly high rates existing among negroes.

In 1920 there were 10,463,131 negroes in the United States, constituting almost 10 per cent of the population. The death rates in general are decreasing, but for a while were so much higher than those of the white race that the negro population is only one-half in proportion to the whites of what it was a century ago.

At birth a negro child has 14 years less expectancy of life than a white child; at 32 years, seven years less, and at 62 years, two years less. One of the reasons why negroes die faster than do whites is a lessened physical strength and resistance.

It must be remembered that they are a transplanted people living under conditions different from those under which the race grew. They have had, furthermore, less opportunity for education, less knowledge of sanitation and disease prevention.

Among the diseases which occur most frequently in the negro race are tuberculosis and diseases of the kidneys and lungs.

The murder rate is six times that of the whites. The diseases which seem to affect the negroes less than the whites are nervous disturbances, eye troubles and skin diseases. Their suicide rate is, moreover, about one-third that of the white race.

Because of their increased rate of mortality and their lessened life expectancy, they usually are forced to pay higher insurance rates than do white people.

DEMOGRAPHY OF THE NEGRO.

Dr. LOUIS I. DUBLIN of the Metropolitan Life Insurance Company makes a very hopeful statistical estimate of the future of the negro in the United States. His statistics and conclusions are to be found in an article in The American Mercury entitled "Life, Death and the Negro." The history of the race in the United States since it first crept upon the tables of vital statistics in 1790, when the observed colored population was 757,208, down to 1920, when it was 10,463,131, shows that it has multiplied nearly fourteen times. The rate of increase greatly slackened in the decade 1910-1920, when the increase was 6.50 per cent., as compared with 11.20 in the previous decade. The latter was only about a third of what it was at the beginning of the nineteenth century. Despite the exceptional fecundity of our colored population, its percentage of the total fell to 9.9 in 1920 from 19.3 in 1790.

9-3-27

There was a time when there were "doleful prophecies" that the race problem would be settled by extinction; but they have been discredited by the improved health conditions which the colored people have shared with white Americans. According to Dr. DUBLIN, the expectation of negro males at 50 is only a year less than that of white males, and of negro females only a little over two years less. A good indication of what is happening is the experience of the Metropolitan Life Insurance Company, which has more than two million colored men, women and children policyholders on its books —"a fifth of the total colored population." In sixteen years their mortality record showed a decline of 16.3 per cent. There has been a marked improvement in respect of deaths from tuberculosis, pneumonia and communicable diseases, though there is a continuance and high prevalence of certain degenerative diseases.

Concern is caused by a recent upward trend in the mortality rate coincident with the shift in occupation from agriculture to industry and the heavy migration from the "easy, leisurely life" of the South to the "more trying environment" of the North. The New York migration is an exception, but there has generally been an increase in the death rate in the Northern cities and a deep cut in the birth rate. "It is only in the rural areas of the South that there is now an appreciable excess of births over deaths." It is in the South, too, that the negroes are giving most striking evidence of their latent power and possibilities. The race's demography is dependent in a measure upon its geography.

As to the future, it is prophesied from present tendencies that by the year 2000 the negro population will be about fourteen and a half millions. But at that date the total population will be somewhere near 185,000,000, which means that the colored people will constitute a little less than 8 per cent. of the total, as against 10 per cent. today. It can only be hoped that Dr. DUBLIN's concluding prophecy as to the negro's achievement is as accurate as that concerning his numbers: that "it will be recognized not only as the greatest experiment in racial adjustment ever undertaken by man, but as the most encouraging and gratifying episode in our national life."

CATHOLICS JOIN ELKS IN HEALTH PROGRAM IN U. S.

Inadequate Provisions For Protection of the Health Of Race Citizens Arouses Action

WASHINGTON, D. C. Sept. 14. — Impetus is expected to be given a wide sweeping health campaign among colored Americans by a joint demonstration by the Federated Catholics of the United States and the Improved Benevolent Protective Order of Elks of the World which will be held at the Lincoln colonnade Friday night.

9-16-27

Bodies Launched Campaigns

At recent conventions in New York city the national bodies of the Elks and Catholics, launched a move for a country-wide health improvement drive among the Race citizens.

Attention of Elk organizations to Race health conditions was attracted first by a survey made by Charles E. Hall, statistician of the Census Bureau, a year ago, in which he showed an alarming condition of infant mortality among Negroes in all sections of the country. A commission was appointed by the grand lodge of colored Elks, whose report of a nation-wide survey was made at the recent New York session by Dr. W. B. Thompkins, of Kansas City, Mo.; Dr. Charles B. Fisher and Dr. Algernon B. Jackson.

$5,000 Fund Set Aside

The grand lodge set aside a fund of $5,000 for further surveys and dissemination of health information thorughout neglected areas.

The Federated Colored Catholics of the United States were attracted to the health program by Negro conditions in St. Marys County—Southern Maryland, said to be the worst in America. The Cardinal Gibbons Institute, nonsectarian, was established there several years ago, with the purpose of combating the health conditions.

Forces Are Joined

The federation in seeking cooperation of all organizations in its endeavor to establish educational and recreational facilities at the institute, has discovered close similarity of its endeavors with those of the fraternal organization.

To focus attention on health conditions ,and develop community cooperation in their eradication the demonstration at the Lincoln Colonnade was planned, Dr. Fisher stated. Further joint demonstrations later in the year in the interest of Cardinal Gibbons Institute have been planned, according to A. C. Monahan and Eugene A. Clark, assistant superintendents of public schools.

Close cooperation between the Catholic and other organizations was indicated.

Only Eight Hospitals

Investigation has revealed that thereare only eight colored hospitals in the United States approved by the American Medical Association to train internes in the care of more than 10,000,000 negroes when they require hospitalization. They include the Freedman's Hospital, Kansas City General Hospital, St. Louis City Hospital, George W. Hubbard Hospital of Nashville, Mercy Hospital and Fred Douglass Memorial Hospital of Philadelphia, the John A. Andrew Memorial Hospital of Tuskegee, and the Provident Hospital and Training School, Chicago.

Aim For Progress

The program of the health campaign fostered by the Catholic and Elks asks for organization of colored physicians in various localities, careful record of births by city health departments, representation of Negroes on city health boards, ample hospital facilities, extension of sewer systems, paving of streets and sidewalks in colored districts, regulation of garbage collections and better housings in general.

NEED HELP FOR HEALTH.

Hookworm disease in the United States has virtually disappeared and is rapidly coming under control in many parts of the world. That is one item in the report of the International Health Board on its activities in 1926. From its beginning fifteen years ago the campaign against hookworm has been attended by a generous publicity. Nevertheless, it is doubtful if there is yet widespread appreciation of the magnitude of the undertaking and the results achieved. The International Health Board report speaks of the social and economic rehabilitation of six or seven million people. In other words, a single private agency has succeeded in reconstructing human energy and productivity to a considerable fraction of the wastage wrought by an enormous catastrophe like the World War.

8-25-27

The credit does not belong entirely to science, though science, as in the case of malaria, supplies the initial weapon with which to combat mass disease. As in previous reports, this latest chapter of progress stresses the importance of organization. The epidemiologist provides the tool, and he will never be dispensed with. The last word on malaria and the mosquito, for instance, was not pronounced a quarter of a century ago by the heroic investigators in Cuba. Further inquiry has narrowed down the guilt of anopheles to only one of three species common in the United States. This has made possible a concentration of effort against the responsible Quadrimaculatus. His breeding places and seasonal habits being known, it has been found practicable to converge on him and ignore other species, thus securing control of malaria at a reasonable cost even in sparsely inhabited areas. Concentration means organization, and chief stress is laid on regional organization, on local self-help. The International Health Board derives much less satisfaction from what it has done through its direct agencies than from the stimulus it has imparted to the mobilization of native resources. Its health centres in every region of the earth, in Brazil, France, Austria, Poland, the Straits Settlements, India, have their greatest value as demonstration agencies. They are an example to the local populations of what can be accomplished and also an incentive. The peoples are being educated to a higher standard of public health, and opportunities are opened up for young men and women everywhere to train themselves for leadership in the war against disease. The idea, and it has been making progress, is that Poland or India shall ultimately graduate from Rockefeller financial assistance and American scientific direction and learn to fight their own battles with their own resources.

That is why, despite the impressive results already attained in hookworm, malaria and yellow fever, the International Health Board sounds the warning that immediate results are not necessarily the most important. The effect of what is now being done is not always to be traced in birth rates and death rates. The

fullest benefits of public health education are to be looked for only in coming generations.

A Matter of Life And Death

The American Hospital Association, meeting recently in Chicago, has made public a report on the status of Negro hospitals in the United States which embodies a vigorous challenge to the Negro medical profession and to the race at large. Coming as it does, upon the heels of that able and encouraging report of Dr. Louis I. Dublin, statistician for the Metropolitan Life Insurance Company, the report strikes a vital note in the life of the American Negro and at the same time furnishes a wholesome and altogether palatable companion dish to the one so temptingly served us by Dr. Dublin.

The report reveals that of the 187 or 200 Negro hospitals in the United States only ten are recognized as proper institutions for the training of internes. These ten hospitals afford only forty or fifty positions for the 150 or 200 Negroes who graduate annually from the medical schools. This deplorable and startling condition, viewed in its enormity, casts a menacing shadow upon the future of the Negro physician and nurse. To use the words of the report:

Journal and Guide

In the next two or three generations registered Negro nurses and practicing Negro physicians will be curiosities, unless steps are taken directly to thwart the present trend.

9-10-27

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Norfolk Va

As to the exact method of raising this money nothing definite was done. Such a matter is no small job and deserves liberal support. The financial and advisory assistance of the white race will be sought but it is also incumbent upon the Negro to contribute generously to its support.

For here we are dealing not only with an educational problem but one which involves racial perpetuation. The situation is neither Southern nor Northern, but national in scope. The value of health in dollars and cents may be approximated but never fully and definitely adjusted.

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JOURNAL
FLINT, MICH.

SEP 12 1927

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One of the outstanding features this year has been the great decline in the deaths from tuberculosis. This disease has been steadily yielding to modern health measures for years, but an especially large gain has been recorded against it this year. The season just past, moreover, is that of the greatest mortality from tuberculosis, and it is confidently believed that complete figures for the year will establish a new record that will stand as the greatest in history.

Influenza and pneumonia have been held in check satisfactorily during the first half of 1927, health statistics show. The typhoid rate rose slightly, but there have been no widespread epidemics of this disease as a result of the turbulent conditions in the Mississippi flood area as was feared. Measles, scarlet fever and whooping cough have claimed fewer victims than usual. Cancer has not shown any appreciable change for the better in spite of efforts being made to control it. The conquest of cancer, however, is one of the problems left for the future, and some of the next great step in medicine and public health work will be in cancer prevention and cure, it is believed.

The general hopeful tone of national health progress is offset to some extent by the increase in the number of accidental deaths. The record for these is high, and of the total, automobile fatalities account for one-fourth. Drownings registered a ten percent gain, although the statistics available do not attempt to account for this. Swimming and first aid are being taught in schools and on playgrounds throughout the country, and doubtless this factor prevented a higher drowning rate even than that recorded.

Deaths from diseases decline and those from accidents increase. There is nothing mysterious about this. We are one of the most active nations in public health work, but one of the most notoriously careless with the mechanical devices which a scientific age has given us. To greater or less extent our safety and happiness depend on the efforts we put forth to safeguard them.

Register
Kennett Mo.
SEP 1 1927

THE NEGRO AND HIS FUTURE.

The most important questions concerning the future of the Negro in America have been statistical and biological. Whether the most important question is statistical or biological, remains to be seen. The vital statistics of the Negro race as it is represented now in America, are however, important enough in themselves to point the way to his future. Where is the Negro's future, in the North or the South? And what kind of future will it be? These questions it seems to the Register are very largely answered in a statistical article on the Negro in the current American Mercury—"Life, Death and the Negro" by Louis I. Dublin, editor of the Statistical Bulletin of the Metropolitan Life Insurance Company, and one of the leading statisticans of America.

Two questions are answered by Dr. Dublin's article: the Negro is here to stay, that is he is not dying out, and he is not increasing in numerical importance. In other words it becomes clear from Dr. Dublin's figures that the Negro Problem, so called, will be essentially the same in the year 2000 as it is today. The art of statistics, of course, is in reading something from them and Dr. Dublin has this to say. "A striking evidence of the new prosperity of the South is the freshness and activity of the towns and villages in which Negroes live. Roads, new homes, schools and churches are being built on an immense scale. New paint is everywhere in sight. Banks managed by Negroes are increasing, and the deposits are mounting." And the future of the Negro lies in the South. "Undoubtedly," Dr. Dublin says, "the Negro will find his best interests served in the South, where adjustments will make his life easier and richer. His interests will be best served by remaining on the farms where his energies in general will be best served."

Dr. Dublin does not make his recommendation to the Negro unsupported by statistics. In fact, this conclusion is fairly forced upon the reader by the vital statistics. Only in the South, and on the farm have the births exceeded the deaths among the Negroes. In Chicago, Philadelphia and Detroit deaths far exceed the births, and the Negro becomes a prey to diseases to which he is peculiarly liable.

This statistical article does not refer to intelligence among the Negroes, but needless to say the curve of intelligence among them is very low, and will always remain so. There have been outstanding Negro artists and poets, like Paul Laurence Dunbar, the poet, Booker T. Washington, the educator, and among those living, Dr. W. E. B. DuBois who wrote "The Souls of Black Folk"— a enetrating writer and thinker. But these are few, and the mistake that the Negro leaders who represent the peak of intelligence among their race make, is in thinking that they can reach an arm down and drag their race up to their height. That cannot be done. It can never be done. The future of the Negro is with his hands, hands that Booker T. Washington showed, may make him skilled as an artisan, or in the field.

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N. Y. WORLD
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The table on deaths and death rates of Negroes in the various registration area States has a bearing on the Negro migration from the South to the North and West. Wyoming leads in the number of deaths of Negroes per 100,000 with 33.8 in 1922 and 41.9 in 1924. The Negro death rate in Idaho was 15.2 in 1922 and 28.8 in 1924, and that of Colorado 29.9 in 1922 and 27.6 in 1924. These three States have the highest rate per Negro population. Georgia has the lowest rate, with 12.2 in 1922 and 14.0 in 1924. All Southern States run low.

Homicides among Negroes, according to the Census Bureau record, far exceed those of whites. The death rate for the white rate, 40.1. Kentucky record with 64.7. Florida, with a homicide rate of 28.9, with 12.6 for whites and 62.8 for Negroes, had the highest rate for the two races.

California leads in the number of suicides, her rate being 28.0 in 1924, compared with 13.8 in 1924. The ratio per race is 5.4. The rate has risen there from 4.0 in 1918.

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Register
Danville, Va.
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Health-1927

General.

Montgomery, Ala. Advertiser

APR 17 1927

THE NEGRO'S HEALTH IN THE SOUTH

A health chart, compiled by the State Health Department of Alabama, contains some startling information concerning the health of the American negro in the North as compared to his health in the South. It is not a new truth that we learn from the chart, for it has long been known that colored people are healthier in this warm Southern country than they are in the North. But the truth is more impressive than is commonly supposed.

The death rate among white people themselves from heart trouble, pulmonary tuberculosis and all forms of pneumonia is lower than among white people of the North, and is even less among negroes.

A comparative study is made with New York, Pennsylvania, Massachusetts, Indiana and Alabama. In New York there are 74.5 deaths in each white 100,000 people from pulmonary tuberculosis, while in Alabama there are only 52.5. In New York there are 395.3 deaths among colored people, while in Alabama there are only 158.5, or less than one-half.

Deaths from diseases of the heart among white people in New York are 260.5. Pennsylvania is not far behind with 248.8. Indiana and Pennsylvania each has 194 deaths, while Alabama, only approximately one-third of that of New York, has 93.7.

Among the negroes, 346.9 die from heart diseases in New York, while in Alabama only 154.4 die.

In deaths of negroes from all forms of pneumonia perhaps the greatest difference is shown. In New York 116.7 die among the whites, while in Alabama 81.4 die. In New York 367.5 is the death rate from pneumonia among negroes, while Pennsylvania is not far behind with 366.4. Less than half as many negroes die in Alabama than in Pennsylvania and New York, the rate being 135.1 in this State.

These statistics cause The Anniston Star to say in an editorial.

When the colored people of our state begin to realize the hardships for their race in the North and East they will forget their Utopia. The South is undoubtedly the natural abode of the negro in this country. He cannot stand the congested cities and the cold weather of the North.

To be sure the negro can ultimately reduce his death rate in the cold country, but only at a heavy price. The diseases to which he succumbs most readily, such as pneumonia and tuberculosis, should in time rest more lightly on him for the reason that the individuals of his race who are most susceptible, or most predisposed to them, will be killed off. The survivors, being less susceptible, will be the forerunners of generations with a higher expectation of immunity.

VIRGINIAN-PILOT
NORFOLK, VA.

SEP 1 2 1927

Dr. Dublin On the Negro's Future

So much of the current discussion of the Negro's future in the United States is a reflection of the hopes, fears and dogmas of special groups, that it is profitable to come upon a treatment of the question that abjures all the sentimental and philosophic preconceptions and confines itself to objective observation. Such a treatment is Louis I. Dublin's "Life, Death and the Negro" in the current number of the American Mercury. Dr. Dublin, a Ph. D. of Columbia University, is statistician for the Metropolitan Life Insurance Company, and his specialty is interpreting actuarial data. On the books of his company are 2,000,000 Negroes—one-fifth of the total colored population of the United States. From a study of the disease and mortality records of his company's policy-holders as well as of the data available in Federal and municipal records, Dr. Dublin has arrived at a number of interesting conclusions, some of them apparently incontrovertible, some of them conjectural, some of them destructive of generalizations hitherto widely entertained, all of them throwing light on an absorbing American question.

One of the generalizations that emerge sadly battered from Dr. Dublin's study is the one which holds that the Negro in the United States is doomed to ultimate extinction by way of a declining birth rate and rising death rate. That idea has been seized upon by more than one Nordic pessimist as the easiest escape from the dilemma that embittered his thinking. Repatriation of the Negro race is impracticable. Obliteration by absorption is unthinkable and repugnant to both races. What would be nicer, then, if Nature solved the problem in its own gentle way by a protracted excess of deaths over births? The pessimists who were attracted to this solution found certain corroboration in the declining rate of increase in the Negro population. But this declining rate of increase, Dr. Dublin shows, was due to adverse economic and health factors that attained their greatest malignity in the first few decades following emancipation. In the present century these factors are losing their malignity and the morbidity and mortality tables are reflecting the improvement. Under present conditions, Dr. Dublin finds, the expectation of life of Negro males is under one year less than that of white males, and of Negro females a little over two years less. "The recent gains in the average length of life are entirely commensurate with those of the white population." The upshot of these considerations is the prediction that the Negro population of the United States is destined for a steady and uninterrupted increase until it reaches a point of rest at approximately 15,000,000 souls. That figure, thinks Dr. Dublin, will be reached in about seventy years, when the white population will have increased to 185,000,000, and when both racial elements, unless the calculations are upset by immigration or other incalculable factors, will cease to increase in obedience to controls that emerge in every western civilization that attains economic maturity.

Another concept that Dr. Dublin's conclusions tend to invalidate is that the diffusion of the Negro race in the colder sections of the country is a racially beneficial development. Certain benefits, Dr. Dublin admits, have come from the migration, but they are offset by ill effects on the Negro's health. His considered opinion is that "the Negro will eventually find his best interests served by staying in the South, where adjustments will make his life easier and richer. His interests will be best served by remaining largely on the farms, where his energies, in general, will be best rewarded."

If Dr. Dublin reasons correctly and if it be true that economic and health considerations are the most powerful determinants of population distribution, then we must look forward to a permanent Negro population of 15,000,000 people, the greater part of it permanently domiciled in the South. The life insurance statistician avoids the sociological aspects of his subject, but he ventures the concluding thought that the years to come will probably see the Negro "playing an increasingly important and worthy part in the affairs of the country" and that "his achievement in America will be ultimately recognized, not only as the greatest experiment in racial adjustment ever undertaken by man, but as the most encouraging and gratifying episode in our national life." In the hope every thoughtful American, every thoughtful citizen of the Southern States must join. A failure of the two races to work out in these spacious and productive United States a permanently happy and mutually respectful way of living and working together, would be nothing less than an indictment of civilization.

FREEMAN
KINGSTON, N. Y.

SEP 1 2 1927

INCREASE OF NEGROES.

In 1790 there were reported 757,208 negroes in this country and by the census of 1920 there were 10,463,131. It is therefore concluded by Dr. Dublin of the Metropolitan Life Insurance Company, in an article in the American Mercury, that in the interval of 130 years the American negro multiplied fourteen times from natural increase. This overlooks the continuing increase of the original stock by means of the slave trade, which was not outlawed even by the Federal Constitution until 1808 and was continued by smugglers for half a century afterward. Of course none of the 150 vessels which Rhode Island alone had in the slave trade as late as 1770 continued the business openly after 1808, but smuggling continued right along. In 1859 the slaver Wanderer, sailing under the flag of the New York Yacht Club, landed on the coast of Georgia 750 blacks from the Congo, many of them not more than twelve years old, and such of them as reached the age of eighty years are living today.

These facts show how unreliable is any calculation of the increase of the American negroes based only on the number reported in this country by the census of 1790. Mr. Dublin himself finds that, despite the fecundity of the colored population, its percentage of the total population fell to 9.9 in 1920 from 19.3 in 1790. He finds also that, while the health of the negroes in general has bettered, there has been death rate increase in "the more trying environment" of the North and a great decrease in the birth rate, there being now "only in the rural areas of the South an appreciable excess of births over deaths." Though optimistic of the future, Dr. Dublin concludes that by the year 2000 the negroes will be less than 8 per cent of our population as compared with their present percentage of less than 10 per cent

Views Of Other Editors

VITAL HEALTH NEED

Kansas City cannot afford to maintain an ostrich-like attitude toward the facts revealed in the tuberculosis survey among Negroes, recently made by Dr. W. J. Thompkins, assistant to the commissioner of child hygiene and communicable diseases. This is one situation in which the smug, American attitude of "me and my wife, my son John and his wife, us four and no more" is not only inhumane but dangerous as well. No community can permit a cankerous sore to continue in its midst and not suffer from the spread of the corruption.

The alarming increase of tuberculosis in the Negro sections of the city during the last five years is a problem of the entire community inasmuch as the Negro has such wide and varied economic contacts outside the home. Moreover, tuberculosis is the most difficult of all communicable diseases to segregate or limit geographically.

No overnight panacea can solve the tuberculosis problem either among whites or Negroes. Persistent remedies and preventive measures are necessary. However, there are some immediate steps that the city can take in alleviating present conditions.

The first of these is a rigid enforcement of the sanitation laws, particularly in the Negro tenment districts. Dr. Thompkins says in his report:

"There is not a sanitary law in the medical code that has not been violated each day during these past five years."

Another urgent and fundamental step is the improvement of Negro housing conditions. Dr Thompkins has compiled a list of Negro residences which are breeding places of tuberculosis and which should be overhauled and renovated, if not destroyed, in order to prevent further calamity. He reports that there are blocks of such houses, each of which shelters from one to ten cases of tuberculosis. In some such homes entire families are diseased.

These buildings have not been painted, papered or remodeled in from ten to fifteen years. In many instances families in good health moving into such places have become infected with tuberculosis. Many of these tenement buildings and shacks are owned by well-to-do citizens or financial organizations that by failing to remedy conditions have remained indifferent both to their civic and moral duty.

If the owners of such property cannot be awakened to their responsibilities, the city should have—and enforce—a housing code that will eliminate such dangerous plague spots. —Kansas City Post.

THE NEGRO IN THE NORTH

Health authorities of the State of Alabama, which finds its labor supply depleted by northward migration of its colored citizens in large numbers, have been studying the comparative health of the colored race in the North and the South, with very clear results that show the migrant takes chances in locating in Pennsylvania or New York.

Per 100,000 population, in New York, there are 395.3 deaths annually from tuberculosis, while in Alabama the rate is only 158.5. In Pennsylvania deaths from heart disease run to 194, while in Alabama they reach only 93.7 per 100,000. In New York pneumonia takes 367.5, in Pennsylvania 366.0 and in Alabama only 135.1.

Climate has a lot to do with it. No doubt the transition from country life to city life is another factor. Crowded tenement quarters in a big Northern city deprive the northcomer of many aids to health which he enjoyed automatically in the open country of Alabama, or its smaller cities. Perhaps the night life and other dissipations of Northern cities are also an appreciable factor in the greater mortality in the North.

As years go by the Southern Negro becomes acclimatized in the North. The death rate will go lower because the more susceptible will die off and those who are most immune will remain. In a few generations the race will be as healthy and long-lived North as South. But meantime the price of the migration is heavy. Nevertheless, the Negro is destined to keep on migrating northward, and to play an increasing economic part in the industrial northeast of the United States.—Philadelphia Bulletin.

News
Tuscaloosa-Ala
SEP 20 1927

DAILY HEALTH HINTS

BY DR. MORRIS FISHBEIN
Editor Journal of the American Medical Association and of Hygeia, the Health Magazine

In a recent consideration of mortality rates in the United States a prominent physician analyzed the particularly high rates existing among negroes.

In 1920 there were 10,463,131 negroes in the United States, constituting almost 10 per cent of the population. The death rates in general are decreasing, but for a while were so much higher than those of the white race that the negro population is only one-half in proportion to the whites of what it was a century ago.

At birth a negro child has 14 years less expectancy of life than a white child; at 32 years, seven years less, and at 62 years, two years less. One of the reasons why negroes die faster than do whites is a lessened physical strength and resistance.

It must be remembered that they are a transplanted people living under conditions different from those under which the race grew. They have had, furthermore, less opportunity for education, less knowledge of sanitation and disease prevention.

Among the diseases which occur most frequently in the negro race are tuberculosis and diseases of the kidneys and lungs.

The murder rate is six times that of the whites. The diseases which seem to affect the negroes less than the whites are nervous disturbances, eye troubles and skin diseases. Their suicide rate is, moreover, about one-third that of the white race.

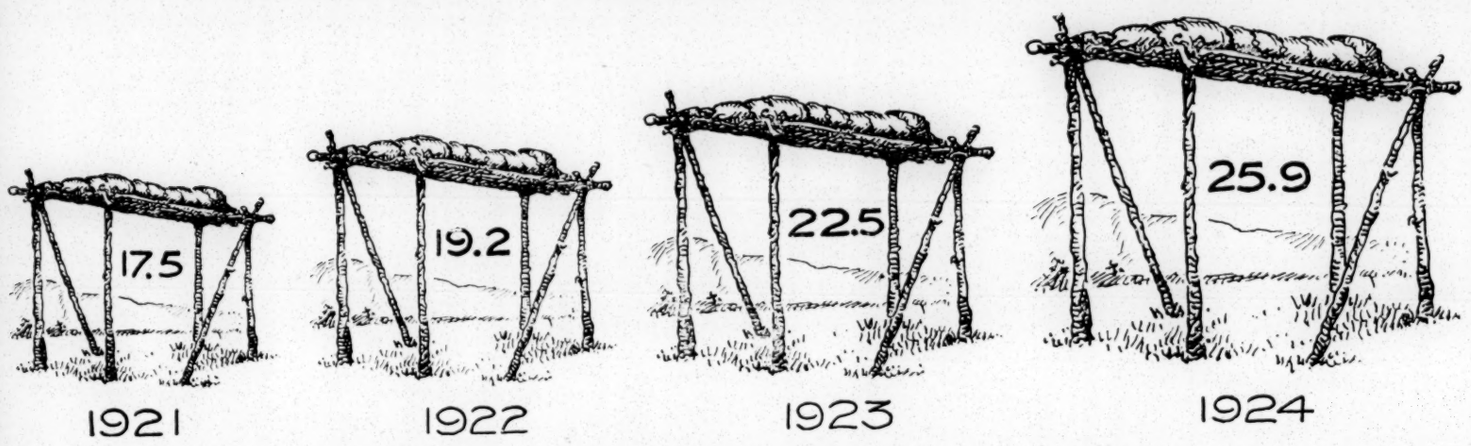
Because of their increased rate of mortality and their lessened life expectancy, they usually are forced to pay higher insurance rates than do white people.

CURES FOR POISON IVY—Victims of poison-ivy, poison-oak and poison-sumac can end their troubles very easily, according to James F. Couch of the United States Department of Agriculture. Science Service's *Daily Science News Bulletin* (Washington) reports further as follows:

"'Just ask your druggist to make up a 5 per cent. solution of potassium permanganate,' says Mr. Couch, 'and swab it on the poisoned places with a bit of absorbent cotton or a soft cloth. The permanganate destroys the ivy poison, but does no harm to the skin, except that it makes a brown stain. Most of us do not want to let this remain; and it can be removed by washing with a 1 per cent. solution of oxalic acid. Oxalic acid is a poison, so that if you are afraid of children getting hold of it, you may use instead a 1 per cent. solution of sodium bisulphite, or even just plain soap and water, tho the latter is a bit slow in taking off the stain. If the skin has been very much broken by scratching or otherwise and is raw, the oxalic acid will cause a temporary stinging, and soap and water is preferable for removing stains from such sensitive surfaces. If the skin is very tender, the solution of potassium permanganate may be diluted with water before using.'

"The permanganate treatment is recommended only as a remedy for poisoning that has already taken place. Persons who know that they are likely to be poisoned may prevent the plants from harming them with a wash devised by Dr. James B. McNair of the Field Museum, Chicago. This consists of a 5 per cent. solution of ferric chlorid in a fifty-fifty mixture of water and glycerin, to be washed on all exposed parts of the skin and allowed to dry there, before going where the dangerous weeds grow. The iron in the chemical combines with the poisonous principle of the ivy and changes it into a harmless, non-poisonous compound. None of the remedies recommended by the two scientists have any patent or proprietary medicines in them. They are standard and well-known chemicals, and any druggist can make them up in a few minutes."

Health - 1927 General.



HOW THE INDIAN DEATH-RATE PER THOUSAND IS INCREASING

INDIAN DEATH-RATE RISING

ARE THE INDIANS DYING OUT after all? Recent statements to the effect that their numbers are growing, sponsored, it is charged, to some extent by government officials, are now being strenuously denied. Dr. Haven Emerson, professor of Public Health Administration in Columbia University, calls the U. S. Census to witness that the Indian death-rate is rising, and not falling. He says, in a press bulletin:

Literary Digest

"I have the mortality tables before me, showing the deaths per thousand of Indians within the registration area. These tables show an increase of 48 per cent. in the mortality rate among the Indians in the four years ending 1924, the last year for which complete data have been tabulated. In 1921 the Indian death-rate per 1,000 of Indian population in the registration area was 17.5. In 1922 it was 19.2 per 1,000. In 1923 it was 22.5 per 1,000. In 1924 it was 25.9 per 1,000, or approximately twice the white death-rate.

4-16-27

"The above statistics are startling enough. But the tables show that the Indian death-rate per 1,000 in 1924 was 34.5 in Montana, one of the States with large Indian population, and whose Indians nearly all live on reservations under the exclusive jurisdiction of the Bureau of Indian Affairs. In North Dakota the rate was 33 per 1,000. In Washington it was 34.5 per 1,000. And in Wyoming, whose Indians are under Indian Bureau jurisdiction, the 1924 death-rate was 86.1 per 1,000. These figures presage the extermination of whole great tribes, proceeding swiftly or slowly.

"I should explain here that the Census Bureau data is obtained from the Bureau of Indian Affairs; the Census Bureau and the Indian Bureau join in confirming this statement. The Indian Bureau data is checked by the Census Bureau against the death and birth reports of the State Boards of Health, duplicate reporting being thus eliminated. The Indian Bureau, in the face of the yearly census reports, and without referring to them or challenging them, continues to announce a steadily falling Indian death-rate, when the contrary is the fact.

"Two factors in the Indian death-rate call for particular notice. One is the infant mortality (deaths under one year, per 1,000 living births within the year). Such deaths in the population at large, in the birth registration area, were 70.8 per 1,000 of births in 1924. Among negroes they were 114.1. Among Indians they were 190.7."

Dr. Emerson concludes that either the expenditure on Indian medical service and health is excessively insufficient, or the administration of the Indian Health Service is excessively incompetent. As a matter of fact, he charges, a disinterested investigation would prove that both these conclusions are substantially correct. He goes on:

"The publication of any such statistics as those recited here, affecting any population in the United States of America other than Indians, would result in immediate action by State Boards of Health. No such result can follow in the case of Indians because the jurisdiction over their persons and property is federal. Hence it is only the United States Government which can act. The chief action of the Indian Bureau appears to be a propaganda action designed to allay the public mind and to present the Bureau as the sufficient agency working among rapidly improving conditions. The facts have long been known to the Indian Bureau; it would appear that there is no hope of adequate remedy save through action by Congress, preceded by an investigation."

Says *American Indian Life*, issued by the Indian Defense Associations of California (San Francisco):

"In public speeches, in printed documents, in news releases, and indirectly in many other publicity channels, likely to be given great credence by the American public, the Bureau of Indian Affairs is declaring that the Indian population of the United States is steadily increasing. The Bureau statements, varying somewhat in phrasing, are all similar in character to the words of the Assistant Commissioner of Indian Affairs, Mr. Edgar B. Meritt, who said to a number of audiences on his recent Pacific coast speaking trip, in his unhappy attempt to reply to Congressman James A. Frear's grave charges:

'The truth of the matter is that the Indians in the last twenty-five years have been steadily increasing in population and are no longer a vanishing race. For example, in 1900, there were 270,544 Indians in the United States, and to-day we have 349,876. The Indians are increasing in population at the rate of about 1,500 per annum, which is the result of the work of the Indian Bureau along educational and health lines.'

"But the inquiring mind will find no adequate statistical support for these statements—they are assertions unsupported by records. In 1921 the Bureau of Indian Affairs ceased to publish any vital statistics. This renders it difficult to find access even to the data that may be available. But from what appears in print or in record form of some sort, scientifically minded persons are unable to accept without question the isolated statements of the Indian Bureau."

The same paper quotes as follows, from an official report by Gen. Hugh L. Scott, passages that it thinks may serve partially to explain the increasing death-rate. We read:

"It is inconceivable to me that Congress would allow such conditions to continue if the facts were fully imprest upon it, and I recommend that the Honorable Secretary of the Interior make a special effort to secure the funds he considers necessary to stamp out trachoma in one year, and to provide sufficient sanatoria to cover the Indian country. The present conditions are a reproach to our Government, and should no longer be allowed to continue.

"Among all the agencies visited it was noted that the vaccination for smallpox and the inoculation for typhoid fever were inadequate. These are preventable diseases, as shown by their elimination from the military service.

"The people who are on my mind are the superannuated, the lame and the blind, who are unable to earn anything. . . . They have a very insufficient ration given them at many agencies that keeps them undernourished and makes them the prey of every passing disease. I believe that many have died prematurely in the past from these causes. I note that this ration is being made adequate by the issue of horse meat at the Fort Belknap Agency."

Figures in the "World Almanac," supplied by the Indian Commissioner, give our Indian population in 1865 as 294,574, in 1920 as 333,702, and in 1926 as 349,964. But on another page of the Almanac the Indian population is given as 265,683 in 1910 and 244,437 in 1920.

CHILD HEALTH DAY LAUNCHED

Country Wide Celebration Will Be Held May 1. Churches To Aid.

NEW YORK, April 6—Secretary of Commerce Herbert Hoover who is also President of the American Child Health Association, Saturday launched the movement for the celebration of National Child Health Day on May 1. The celebration is an annual affair in which every large organization takes a part and programs are prepared in every community through health department's schools and clubs.

"National Child Health Day is intended to obtain a square deal for every child in the United States," Secretary Hoover said. "As the day falls this year on Sunday, the American Child Health Association has called in to counsel the churches of the country to ask them to join forces with all the others who are concerned with the conservation of childhood.

"The Catholic Bishops of the country have sent forth word that the day shall be observed with prayers, devotions and sermons. The Jewish, Colored and Protestant churches are planning special celebrations in churches and Sunday schools. The Mormon church in Utah will withdraw the regular Sunday school lesson on May 1, giving instead to its 250,000 children a lesson on the spiritual aspects of physical well-being.

"After May Day we expect to call together at Washington the leaders in the observance a great national meeting for child health, to determine how to strengthen their lines of cooperation and how to bridge the gap between scientific research and its application to the lives of children."

U. S. NEGROES WILL BE EXTINCT IN 200 YEARS

Smith College Professor Predicts Extinction Will Be Due To Climatic Conditions

(From Boston Chronicle)

New York—Dr. Frank H. Haskins professor of sociology in Smith College and at present lecturer at Columbia University, predicted at a luncheon meeting of the conference on immigration policy at the Hotel Woodstock, that the Negro race in the United States would become extinct in 200 years. He said the black race in this country had been decreasing relatively for the last 20 years and he prophesied that by 2127 the race would begin its absolute decline toward ultimate extinction.

The process of extinction, Dr. Haskins said, was due to climatic conditions and the pressure of industrial competition. They probably would be retarded to a certain extent, he explained, by Negro segregation in the South and hastened by immigration to the North and by being scattered over wide geographical areas, but he regarded as certain the ultimate passing of the Negro as a factor in the American population.

The subject was brought out by a question put to Professor Haskins by Max Koler, an attorney, who wanted to know if the speaker did not consider Negro migration to the Northern states as the result of immigration restriction, a serious menace.

large audience listened to the argument with rapt attention, enjoying the great truths expounded, in applying the parable to the youth of today, particularly the sinner.

Sweet music and inspiring singing by the choirs of the Pleasant Green Baptist Church and the First Baptist Church, the Roger Williams chorus and the double quartet from Fisk University added to the solemnity and dignity of the service. The entire service was broadcast by station WSM which offered its station for the occasion.

NEGROES IN U. S. DOOMED TO DIE IN 200 YEARS

So Declares Noted Columbia Professor in Outspoken New York Address—The Economic Grindstone Will Do the Trick He Avers

(From New York Tribune, March 20)

Dr. Frank H. Haskins, professor of sociology in Smith College and at present lecturer at Columbia University predicted yesterday at a luncheon meeting of the conference on immigration policy at the Hotel Woodstock that the Negro race in the United States would become extinct in 200 years. He said the black race in this country had been decreasing relatively for the last twenty years, and he prophesied that in 1935 the race would begin its absolute decline toward ultimate extinction.

The processes of extinction, Dr. Haskins said, were due to climatic conditions and the pressure of industrial competition. They probably would be retarded to a certain extent, he explained by Negro Segregation in the South and hastened by migration to the North and by being scattered over wide geographical areas, but he regarded as certain the ultimate passing of the Negro as a factor in the American population.

The subject was brought out by a question put to Professor Haskins by Max Kohler, an attorney, who wanted to know if the speaker did not consider Negro migration to the Northern States as the result of immigration restriction a serious menace.

"No," Dr. Haskins said. "I have made an exhaustive study of the Negro question. The Negro in this country bids fair to disappear absolutely within a couple of hundred years.

"The black race has decreased relatively for the last twenty years. The Negro population is about 12,000,000. It increased only 650,000 in the decade between 1910 and 1920.

"I will prophesy that by the year 1935 the Negro death rate will equal the birth rate, and from then on the decrease toward extinction will be absolute. And this process will be greatly hastened by the Negro's northward migration, by industrial competition and by being scattered all over the country."

Dr. Haskins's subject was "The National Origins Plan for Selective Immigration." He startled the audience, most of whom appeared to be sympathetic with a liberal rather than a restricted immigration policy, by announcing a substitute proposal for the postponed national origins plan of immigration restriction. He proposed to admit as immigrants only those individuals, regardless of nationality or race, who would appear by physical and mental test "to rise above the average norm of the physical and mental status of the present population of the United States."

A murmur of astonished disapproval ran through the audience. Dr. Haskins braced himself for withstanding the barrage of questions hurled at him. "How can it be done? Who would fix the average intelligence?" "Wouldn't the other nations object and retaliate?" were some of the questions.

"Of course it can be done," Dr. Haskell said. "Why not? Take 10,000 persons and test them physically. Take 10,000 persons and test them mentally. Then strike an average. There is your norm. Fix a norm below which no person could be admitted."

"This country can't any longer pretend to be an asylum for the world's oppressed," the speaker continued. "We would then have to let the bars down and receive an enormous flood of immigrants from all parts of the world. The result would be that our own standard of living would fall to the level of some of the lowest countries in Europe."

Thomas F. Mulholland, of the National Catholic Welfare Association, speaking in behalf of the southern Irish, ridiculed both the national origins plan and the experts who assisted the commission making the calculations, based on 1790 census. He added that the intelligence tests had never been proved.

"I don't wonder that an Irishman objects to the intelligence tests," Professor Hankins retorted. "The records show that the Irish were ninth in the army tests, seventh in an intelligence test in a group of ten and sixth in a group of twelve. These were all mental tests and they don't rate the Irish very high. The Japanese and Chinese stand very high. It has been utterly impossible to find tests in which the native American stock surpasses the Japanese."

Negro Health Needs Democracy:

Negro health ought not to be any different from the health of any other American who lives, labors and loves as a peer, along with his fellow men. Yet, statisticians spend sleepless nights figuring out the Negro's chance to reach three score and ten years before shuffling off this mortal coil. His chances, they say, are poor. He is too often the victim of a premature demise. Choice in insurance politics are withheld from him because of his susceptibility to ill health. He is different they say, from other peoples of America.

We are ready to admit that facts usually smash theories to smithereens and that, hence, Negro health is not as good as it ought to be; and yet, what are the causes of Negro high death rate? Is the Negro a weakling? No, no! If anything he is the harder when facing exposure What, then, is the cause of Negro ill health

It is the uneven life which he is forced to live under the fear on the part of the contemporary group that some sunny day he might become dominating and dangerous.

He comes into the world under economic stress, with few of the habilaments of infant necessity. He enters early childhood under high economic pressure. His parents are pressed for ways and means to supply him with the necessities of life. His home is down at the end of the street, far away from public utilities and other blessings, from which he is often restricted. His education is frequently scanty and discriminatingly administered thru foolish state laws which insist that the Negro should be treated differently from anyone else in America.

Thus, the physique and the mind are hampered from cradle to grave. Could it be expected that Negro Health should hold its own under such stress?

The open door of democracy will do more for Negro health in a decade than ten thousand conferences will do in as many years, unless the conferences list Democracy, first, as the factor which they intend to remedy.

Anniston, Ala. Star

JUN 1 6 1927

South Is the Natural Abode Of the Negro in This Country

The natural abode of the negro in the United States is in the South, we have long been taught. But despite this, thousands of negroes have joined in an exodus to the North in recent years. While this exodus has not been so pronounced in the past few months, many plantation negroes still visualize the North as a veritable Utopia.

Many of the negroes return to the South with their visions of prosperity shattered. Many others die in the crowded districts of the Eastern and Northern cities.

The Anniston Chamber of Commerce has recently purchased a set of health charts, compiled by Dr. S. W. Welch, head of the state board of health. Among the startling revelations that the charts make in their comparative studies is the amazingly high death rate among negroes in the North and East.

While the death rates of white people from diseases of the heart, pulmonary tuberculosis and all forms of pneumonia is decidedly lower in the South than in the Northern and Eastern states, it is even less among the negroes.

A comparative study is made with New York, Pennsylvania, Massachusetts, Indiana and Alabama. In New York there are 74.5 deaths in each white 100,000 people from pulmonary tuberculosis, while in Alabama there are only 52.5. In New York there are 395.3 deaths among the colored people, while in Alabama there are only 158.5, or less than one-half.

Deaths from diseases of the heart among white people in New York are 260.5. Pennsylvania is not far behind with 248.8. Indiana and Pennsylvania each have 194 deaths, while Alabama, with only approximately one-third of that of New York, has 93.7 deaths.

Among the negroes, 346.9 die from heart diseases in New York, while in Alabama only 154.4 die.

In deaths of negroes from all forms of pneumonia perhaps the greatest difference is shown. In New York 116.7 die among the whites, while in Alabama 81.4 die. In New York 367.5 is the death rate from pneumonia among negroes, while Pennsylvania is not far behind with 366.4. Less than half as many negroes die in Alabama than in Pennsylvania and New York, the rate being 135.1 in this state.

When the colored people of our state begin to realize the hardships for their race in the North and East perhaps they will forget their Utopia. The South is undoubtedly the natural abode of the negro in this country. He cannot stand the congested cities and the cold weather of the North.

Health - 1927

Georgia.

Ragsdale Names 'Clean-Up' Week For January 10

Mayor I. N. Ragsdale Tuesday issued a proclamation declaring the week of January 10, "Cleanup"" week in Atlanta and called on citizens to join the civic committee of the Atlanta Woman's club in familiarizing themselves with sanitary regulations and in complying with the letter of the law.

Mrs. J. R. Little is chairman of the woman's club committee which is sponsoring the week and which will seek to make Atlanta more beautiful and healthy. She explained that this is not a spasmodic drive, but is a program of the club and will be continued after the "Clean-up" week has passed.

The club is attempting to enlist the support of the school and sanitary departments of the city government and civic and patriotic organizations, including the Parent-Teacher associations.

COLORED DEATH RATE DOUBLES THAT OF WHITE IN ATLANTA

Due To Unfair Conditions

Atlanta, Ga., Jan. 24, 1927.—Births exceeded deaths in Atlanta in 1926 by 1,023. There were 4,787 births against 3,810 deaths from all causes. Of the 37 suicides 34 were white and 3 Colored. Total homicides were 73, with only 8 whites and 65 Colored. The death rate for the entire city was 14.57 per thousand, the Colored death rate of 22.49 more than doubling that of the whites at 10.60.

31 Pairs of Twins

Of the 4,787 births last year, 1,607 were Colored. 2,441 male children were born in Atlanta the past year against 2,346 females, according to official figures recently made public by Dr. J. P. Kennedy, city health officer. White males were 1,614 to 827 Colored; white females 1,566 to 780 Colored. There were 46 pairs of white twins born and 31 pairs of Colored twins.

VALDOSTA, GA. Times
FEB 17 1927

National Negro Health Week comes in April—from the 3rd to the 10th. State and municipal health departments, voluntary organizations and the negroes themselves are expected to devote the week to cleaning up premises and study sanitation and other matters that affect the health of the colored people. Of course, the Valdosta negroes are going to excel in this matter.

ATLANTA NEGRO DEATHS DOUBLES THAT OF WHITES

1,607 Negro Births In Total of 4,787 In 1926.

Atlanta, Ga., Jan. 27.—(Pacific Coast News Bureau.) Births exceeded deaths in Atlanta in 1926 by 1,023. There were 4,787 births against 3,810 deaths from all causes. Of the 37 suicides 34 were white and 3 Negroes. Total homicides were 73, with only 8 whites to 65 Negro. The death rate for the entire city was 14.57 per thousand, the Negro death rate of 22.49 more than doubling that of the whites at 10.60.

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DR. BASSETT TALKS ON BETTER HEALTH

(From Savannah Morning News)

A committee of ctiizens met at Cuyler School yesterday pursuant to a call by Dr. H. M. Collier, president of the Better Health Association for Negroes in [illegible] County, and John W. Hubert, its secretary.

Dr. Victor H. Bassett, health officer, was the principal speaker and pointed out that the great end to be attained in the campaign is the formation of good health habits among the young people, cultivation of a high ideal of family life, stimulating the work of the various city clinics, radical elimination of still births, venereal diseases and tuberculosis.

"There are certain evident health assets in the Negro race, a powerful frame and a happy mind that act as disease resistants," he said "To malaria, diptheria, hook-worm and scarlet fever, Negro resistance is high but to tuberculosis, pneumonia and and venereal diseases his resistance is low."

Dr. Bassett offered the resources, equipment and man power of the health department to serve the Better Health Association in putting over its program for a healthier and cleaner city.

Dr. Collier named committees as follows:

. On Model Home, in Yamacray, Mary M. Walker, chairman.

Public Meetings, Dr. L. Smith and Prof. W. Dixon.

Public Schools, Pearl L. Smith.

Private Schools, Ophelia H. Lee, B. F. Hubert.

Church Activty, Rev. N. A. Holmes.

Publicity, Prof. R. W. Gadsden, and J. W. Hubert.

Street Stunts, Victoria B. Roberts

Distribution of Literature, Dr. H. Sessoms.

'ean Up Activity, Nurse, Warren.

Awards, Prof. I. S. Bryant, J. C. Lawrence.

The chairman of publicity out lined a program of clean-up activity to begin at once in preparation for health week April 3-10, which was accepted by the organidation.

The next meeting will occur next Monday afternoon at 5 o'clock at Cuyler School. At that time each chairman will bring in his organized committee and its plan of getting at the job.

Dublin, Ga., Courier-Herald
MAR 25 1927

CONVENTIONS COMING

Macon, Ga., March 23.—(AP)—Macon will be host to twelve conventions during the month of April, according to the calendar of the convention bureau. These conventions will include the Georgia Chiropractors' Association, the States Association of Master Plumbers, the Parent-Teacher Association of the State, the Georgia Education Association which will embrace separate conventions of the county and city school officials Georgia Association of School Superintendents, Georgia Home Economics Georgia Ascociation of Deans of Women's Secondary Schools, Georgia State Kindergarten Association, the Georgia Educational Association for Negroes, the Masonic Grand Council, he Masonic Grand Chapter and State unday School Association.

APR 4 1927

DR. W. A. HARRIS TALKS ON HEALTH

Negro Deaths Here Three Times Greater Than Whites

Speaking on health, Dr. William A. Harris of Savannah stated to a large audience at the Georgia State College yesterday evening that the observance of simple health rules is one of the most important and fundamental questions before the negro race today.

Among other things he said "Health is a state of body and mind." There are several things that we must keep in mind if we are to have good health. We must pay attention to our food. The food should be digestible and should be balanced. We should sleep. The good rules of health call for eight hours of sleep, eight hours of work and eight hours of recreation. Our minds should be serene. We should not worry. Learn to do our best and then avoid worry. The negro death rate in Savananh is three to five times greater than that of the white race. Most of our troubles come from affected hearts, blood vessels or kidneys. We should avoid excessive exercise so as not to strain the heart. Keep the tonsils in good condition, protect the teeth and think good thoughts, and in this way we will do a great service to ourselves, and to our people."

P. H. Stone, state director of extension service, emphasized the great loss that Georgia sustains through sickness. He stated that some reports say that there is one person sick in every fourteen in the negro race in Georgia. Much of this he said is due to malaria and typhoid fever. This comes through the lack of screens in the house and unsanitary toilets. He expressed the belief that no greater service could be rendered the negro race in Georgia than to provide screens for every home, and sanitary toilets, and in this way Georgia's economic assets would be increased over fifty per cent. Clean-up program was announced for today. This will include the State College and the Thunderbolt community.

MAR 22 1927

PUBLIC HEALTH MEET AT LENOX THEATRE

BY J. C. MARDENBOROUGH.

All the people of Augusta and vicinity are urged to attend a great public health meeting under the auspices of the Negro Welfare League at the Lenox theatre Sunday, March 27 4:00 p. m.

Dr. Eugene E. Murphy, president of the city board of health, has kindly accepted an invitation to speak to the colored people at the meeting named above concerning the health and high death rate among us."

All the children of the public and private schools are urged to be present. Teachers and parents are invited to come and bring their children to this very important meeting.

All the insurance companies are asked to help make the health meeting a success, and all the preachers are asked to urge their congregation to come out and hear Dr. Eugene Murphy president of the city board of health, speak on one of the most important problems of the human race.

Moultrie, Ga., Observer
APR 8 1927

Colored School Observed National Health Week

National health week has been observed this week in the colored schools of this city. Every afternoon at the colored school, lectures made on health problems. Those who spoke Tuesday afternoon were: Dr. A. N. Sameuls, colored, who spoke to boys in grades 4th to 9th, most lasting impressions on minds of students in regard to their personal cleanliness, and the necessity of being careful to prevent rather than attempt the cure of contageous diseases. Madam Hinson, colored, spoke to girls in grades 7th to 9th, emphasized the simple definitions of community sanitation so that each student would never forget them. She discussed briefly the great need of the colored girl's being careful about keeping better homes, appearing respectful on the streets and at home. Superintendent Clark spoke of the general impression which he had of the work of the colored school, its routine and discipline.

Wednesday afternoon the students were addressed by Alice Boatright, colored nurse, Friday morning at 10 o'clock students were addressed by Mrs. J. Garrard, county welfare Agent.

HEALTH PLAY AND PROGRAM

At Star Theatre Next Friday

On Friday evening of next week, at 8 o'clock, April 8th the Fourth Annual "Health Play" and Program of phyical exercises and music will be given by Cuyler students and ex-Graduates. While the programs pretains to Health as in previous years every number this year will be new. The plays are even different in many details. Besides Mrs. J. B. Horne, supervisor of music in Savannah Public Schools has selected some of the very best music of this particular occasion.

Among the features will be the vocal solos by Florine Solomon and Mrs. Willie Mae Jones Coleman; selection by the Jubilee Quartet, Cuyler's Quartet, and the Cuyler's Chorus.

Claude Flantroy and Edith Taylor will do some gymnastic stunts and th girls Athletes will appear in one scene.

First play "Where is My Toothbrush?" shows how a decayed tooth may cause Rhenmatism, pains and aches all over the body.

Berneta Greene, as Nellie Reynolds and Mattie C. Blackshear, as Alice Drake, are playing the leading roles in this play supported by such cast as Eli Davis, a Stick of Candy; Alma Reed, Old Lady Rheumatism; Mildred Polote, Little Miss Toothbrush; Lillie Scarborough, Miss Sweet Chocolates; Irma Brooks, Mrs. Reynold; Roal'e Williams, Ice Cream Cone; Willie Johnson, Mr. Decayed Tooth; and Orell Webb, Dr. Collier.

Second play, "Good Health Faries" Tallulah King, "Fairie Fresh Air," Christola Williams, Mary Lou; Wilbu Hover, Billy; and others take the principle parts supported by Louise Butler, Miss Happiness, Annie Stiles, Oat Meal, Beautine Hubert and Wilsie Myers; Miss Strawberry and Orang; Arthur Pope and William Saunders, two milk Bottles; Leon Wheeler and Marion Johnson, Knikht Essie Mae Simmons, Toothbrush; Dorot y Brown, Washcloth; Ruth Harrison, Dame Sleep; Mary Flood, Healthfulness; Columbus Hall, Daddy Exercise. Fruit Family, Fannie Stokes Pear; Ida Porter, Peach; Mary $Irving, Grapefruit; Willester Johnson, Bananna; Sarah Wiley, Vegetables, Louise Brown, Spinach; Dorothy Lawson, Carrot; Esterlene Mitchell, Lettuce; Louise Champen, Potato; Lucile Williams, Beet; Ruth Campbell, Onio; Irine Champlain, String beans; Margurite Fields, Squash; Louis Rivers, Tea Pot; Katherine Mack, Voice; Frying Pan, Edgar Thomas.

Savannah Ga. News

MAR 24 1927

HEALTH PLAY AT STAR THEATRE NEXT FRIDAY

On Friday evening of next week at 8 o'clock, April 8th, the fourth annual health play and program of physical exercises and music will be given by Cuyler students and ex-graduates. While the program pertains to health as in previous years, every number this year will be new. The plays are different in many details. Besides Mrs. J. B. Horne, supervisor of music in public schools, has selected some of the very best music for this occasion. Among the features will be vocal solos by Florine Solomon and Mrs. Willie Mae Jones Coleman, selections by the Jubilee Quartet, Cuyler quartet, the Cuyler chorus. Claude Flantroy and Edith Taylor will do some gymnastic stunts, and the girl athletes will appear in one scene.

The first play "Where is My Toothbrush??" shows how a decayed tooth may cause rheumatism, pains, and aches all over the body. Berneta Green, as Nellie Reynolds and Mattie C. Blackshear, as Alice Drake are playing the leading roles in this play, supported by Eli Davis, a stick of candy; Alma Reed, old lady rheumatism; Mildred Polote, Little Miss Toothbrush; Lilie Scarborough, Miss Sweet Chocolate; Irma Brooks, Mrs. Reynolds; Rosalie Williams, Ice Cream Cone; Willie Johnson, Mr. Decayed Tooth and Orell Webb, Dr. Collier.

Second pla—"Good Health Ferris" Tallulah King, Fresh Air; Christola Williams, Mary Low; Wilbur Haven, Billy; and others take the principal parts supported by Louise Butler, Miss Happiness; and Annie Stiles, Oat Meal Beautine Hubert and Wilsie Meyers, Miss Strawberry and Orange; Arthur Pope and William Sanders, two milk bottles; Leon Wheeler and Marion Johnson, Knight; Essie Mae Simmons Washcloth; Ruth Harrison, Dame Sleep; Mary Flood, Healthfulness; Columbus Hall, Daddy Exercise; Fruit Family; Fannie Stokes, Pear; Ida Porter, peach; Mary Irwing, Grapefruit; Willester Johnson, bannana; Sarah Wiley, applpe; Lula Ryals, pineapple. Vegetable, Louise Brown, spinich; Dorothy Lawson, carrot; Esterlene Mitchell, lettuce; Louise Champen, potato; Lucile Williams beet; Ruth Campbell, onion; Irene Champion, stringbean; Marguerite Fields, squash; Louise River, tea pot Catherine Mack, voice.

Savannah, Ga. NEWS

APR 1 1927

COMMITTEE MEETS AT CUYLER CLINIC

Negro Educational Work Is Discussed

At the Cuyler clinic yesterday the negro educational committee held an important meeting at which time various reports were received and adopted. Chief among them was the financial report of the Marian Anderson concert which showed an appreciable profit over expenses. Next was the report by Ophelia H. Lee, directress of the Opportunity Free Night School, showing an enrollment of approximately 200 men, women and children. Also Rev. E. G. Thomas read three communications from the board of education concerning sites or locations for negro schools. All of these were favorable, except the fact that no funds were on hand for immediate use along these lines. Further, it was reported that vocational aid could be obtained for the night opportunity school from the vocational bureau of education at Washington, D. C. Mrs. M. T. Glaiher was given full power to represent the committee in this connection and report to the body at the next meeting. The committee as a whole was very much elated over all reports. So much so, that the following resolutions were drawn up and unanimously adopted:

"Whereas, the board of public education of Savannah has co-operated so heartily with the citizens and P.-T. A. committee on negro education.

"Resolved, That the committee assembled express thanks to Superintendent O. B. Strong and the board.

"Resolved, That we pledge our civic support to a program of construction to relieve the distressing situation among negro schools, which the board cannot do because of lack of funds.

"Resolved, That we support this board in building and equipping in the most modern way a senior high unit for colored people which shall take care of the academic, industrial and commercial needs of negro students. They have amply demonstrated their capacity for and interest in further training."

The committee members are Rev. S. T. Redd, Rev. E. G. Thomas, President J. C. Lawrence, Rev. T. H. Clarke, Rev. N. H. Whitmire, J. J. Seabrook, Rev. J. H. Brown, O. H. Lee, Dr. J. W. Jammerson, Dr. B. W. S. Daniels, P. L. Smith, Dr. H. M. Collier and Principal J. W. Hubert, chairman.

Associate members are Mrs. A. K. Lawton, Rabbi Solomon, Mrs. F. Wessels, A. S. Otto, Rev. G. B. McGlohon, Mrs. Otto Kolb, Mrs. M. T. Glaiher and A. A. Lawrence.

Savannah Ga. NEWS

APR 1 1927

Death Rate at Atlanta

St. Louis, March 31 (AP)—The death rate among negroes in Atlanta, already higher than in Northern cities, will continue to increase until the city's white citizens are "purged of their mental morbidity," Alanzo C. Thayer, negro executive secretary of the Urban League, declared in a report to the annual conference here today.

He charged the city paid no attention to a one-to-two death ratio between white and negro infants and said it had turned over only one of twenty-four parks to negroes.

"The large proportion of sickness and death among negroes in Atlanta," he said, "is due to lack of recreation facilities and low incomes."

Health - 1927

Georgia.

CHILD HYGIENE EFFORTS BACKED BY HEALTH BOARD

Unqualified indorsement of the aims of the Georgia May day committee, cooperating with the state board of health and the American Child Health association, to set up strict health requirements for all children entering public school systems of the state has been given by Willis A. Sutton, superintendent of Atlanta public schools, association heads announced Wednesday.

The object of the committee is to see that every child in the state gets diphtheria anti-toxin treatment and to provide that each child on entrance into public school systems be in possession of birth, marital, dental and vaccination certificates.

The state is not in a position to provide for the individual child's health prior to his school entrance, Mr. Sutton pointed out, but has a right to demand that the parent see to the child's physical condition before accepting the child in the free school systems.

MACON, GA.

MAR 4 1927

Negro Infants' Health Center Will Be Opened

A health center for negro infants and children of pre-school age will be opened at 463 Cotton avenue by the city-county health department and negro mothers are urged to take their children there for free examination.

The clinic will be open from 3 to 4 p. m. every Tuesday and every Friday, and negro physicians of the city and county will be on hand to make examinations. Nurse Ruth Hartley, of the health department, will be in charge.

The Community Chest is aiding in the work, and the woman's auxiliary of the Bibb County Medical Society donated $25 to provide necessary equipment.

Dr. J. D. Applewhite, health officer, will speak to the negro medical society Friday night in its regular meeting, on the value of p[re]-school clinical work.

SAVANNAH, GA. NEWS

MAR 1 1927

DR. BASSETT TALKS ON BETTER HEALTH

Negro Health Work Committee in Meeting

A committee of citizens met at Cuyler School yesterday pursuant to a call by Dr. H. M. Collier, president of the Better Health Association for Negroes in Chatham County, and John W. Hubert, its secretary.

Dr. Victor H. Bassett, health officer, was the principal speaker and pointed out that the great end to be attained in the campaign is the formation of good health habits among the young people, cultivation of a high ideal of family life, stimulating the work of the various city clinics, partial elimination of still births, venereal diseases and tuberculosis.

"There are certain evident health assets in the Negro race, a powerful frame and a happy mind that act as disease resistants," he said. "To malaria, diphtheria, hookwork and scarlet fever, negro resistance is high, but to tuberculosis, pneumonia and venereal diseases his resistance is low."

Dr. Bassett offered the resources, equipment and man power of the health department to serve the Better Health Association in putting over its program for a healthier and cleaner city.

Dr. Collier named committees as follows:

On Model Home in Yamacraw, Mary M. Walker, chairman.

Public Meetings, Dr. L. Smith and Prof. W. Dixon.

Public Schools, Pearl L. Smith.

Private Schools, Ophelia C. Lee, B. F. Hubert.

Church Activity, Rev. N. A. Holmes.

Publicity, Prof. R. W. Gadsden and J. W. Hubert.

Street Stunts, Victoria B. Roberts.

Distribution of Literature, Dr. H. Sessoms.

Clean-Up Activity, Nurse Warren.

Awards, Prof. I. S. Bryant, J. C. Lawrence.

The chairman of publicity outlined a program of clean-up activity to begin at once in preparation for health week April 3-10, which was accepted by the organization.

The next meeting will occur next Monday afternoon at 5 o'clock at Cuyler school. At that time each chairman will bring in his organized committee, and its plan of getting at the job.

Gainesville, Ga.

MAY 3 1927

Medical Schools Needed.

Atlanta, April 28.—Need of medical schools and opportunity for hospital training for negroes was pointed to as the solution of the "high death rate" among negroes in the South, by Dr. Southgate Leigh, Norfolb, Va., surgeon, speaking before the commission on interracial cooperation here today.

The high death proportion of negroes is because of poor housing, lack of sanitation, mal-nutrition and inadequate medical attention, Dr. Leigh said.

Among other speakers at the closing session this afternoon were W. M. Wilbur, Charleston, S. C., Mrs. B. L. Parkingon, Joseiah Morse and G. Croft Williams, of Columbia S. C.

ATLANTA, GA. Constitution

APR 29 1927

NEGRO DEATH RATE LAID TO IGNORANCE

Need of medical schools and opportunity for hospital training for negroes was pointed to as the solution of the "high death rate" among negroes in the south, by Dr. Southgate Leigh, Norfolk, Va., surgeon, speaking before the commission on interracial cooperation.

The high death proportion of negroes is because of poor housing lack of sanitation, malnutrition and inadequate medical attention, Dr. Leigh said.

"The negro and the ballot" was the topic of discussion by Bishop George C. Clement, of Louisville, Ky. He declared the negro has no desire to change any laws limiting the ballot but added "they do feel these laws should be impartially applied and that negroes who are able to demonstrate their fitness for the ballot should be allowed to vote."

Speaking on the same subject, Dr. M. Ashby Jones declared the south's political solidarity had worked serious disadvantages and "robbed this section of its former national leadership." He said the "unequal application of the ballot" is the chief complaint.

Other speakers at the closing session Thursday afternoon were W. B. Wilbur, Charleston, S. C.; Professor N. B. Bond, University of Mississippi; Drs. B. L. Parkinson, Joseph Morse and G. Croft Williams, of Columbia, S. C.; Dr. Isaac Fisher, Nashville, Tenn.; Dr. E. E. Eubank, University of Cincinnati; Dr. C. B. Wilmer, Sewanee university, and Mrs. Jessie Daniel Ames, Georgetown, Texas.

Several speakers paid tribute to the memory of the late W. R. Miles, of Richmond, Va., former director of the international work in Virginia and North Carolina.

VITAL STATISTIC FOR CLARKE COUNTY

Washington, July 6.—The Child Health Demonstration Committee, of 379 Seventh Avenue, New York City has just released startling vital statistics for Clarke County, Ga., as computed by a demonstration staff, headed by Dr. Bernard E. Carey.

The averages shown for the period 1924-1926 are computed from a total population for the county of 24,193, of which 12,906 residents are white and 11,287 are colored.

The birth rate per one thousand, for the period, was 22.8 white and 16.8 colored; death rate per one thousand, 11.0 white, 15.8 colore; infant mortality (deaths under one year per 1,000 live births), 59.3 white, 125.5 colored; maternal deaths per 1,000 live births, 4.2 white, 10.6 colored; death rates per 100,000 population from typhoid fever, 0.0 white, 11.7 colored; smallpox, 2.6 white, 2.9 colored; scarlet fever, 2.6 white, 0.0 colored; diphtheria, 5.1 white, 2.9 colored; and tuberculosis, 66.4 white, and 204.2 colored.

The Child Health Demonstration Committee in making public these startling figures is laying the foundation for heroic work in counties where Negro health and Negro life are so far below the average.

GA. STATISTICS REVEAL NEGRO'S AWFUL PLIGHT

(Columbian Press Bureau)

Washington, D. C.--The Child Health Demonstration Committee of 370 Seventh Avenue, New York City, has just released startling vital statistics for Clarke County, Ga., as computed by a demonstration staff headed by Dr. Bernard E. Carey.

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ATLANTA

GEORGIA

JUN 30 1927

NEW NEGRO HEALTH CENTER OPENS TODAY

The opening of the new health center of the Neighborhood union will be celebrated Thursday afternoon at 3 o'clock in the chapel of Morehouse college. On the same afternoon the new home at 60 East Fair street, S. W., will be opened to the public and in the evening moving pictures will be shown on the ground. The afternoon program will be featured by musical numbers under the direction of Professor Kemper Harreld, and an address by the negro poet, Georgia Douglas Johnson, who was born in Atlanta and is the widow of the late Henry Lincoln Johnson, former republican national committeeman from the state of Georgia.

Franklin Ga. Herald

JUL 22 1927

HEALTHMOBILE SCHEDULE FOR HEARD COUNTY

JULY 23-29, 1927

Heard county will be traversed by the Georgia State Board Healthmobile, commencing Saturday, July 23, at Franklin, and will then visit five other points in the county up to and including July 29th.

Miss Carroll Swann, from the State Board of Health, was in the county a few days ago to perfect arrangements and fix schedule for the free clinic and instructions for this important week.

At each point named the free clinic hours will be from 2 to 5 p. m. and instructive movies from 8 to 9 p. m., assisted by the committees named at each place:

July 23, Franklin, court house; committee—Mrs. A. C. Crockett, Mrs. A. J. Lane, Mrs. H. H. Alsabrook.

July 25, Centralhatchee, school building; committee—Mrs. C. A. Simonton, Mrs. Jim Spradlin, Mrs. W. D. Echols.

July 26, Glenloch school building; committee—Mrs. Frank Jackson, Mr Columbus Ray, Mrs. M. A. Brown.

July 27, Unity High, school building; committee—Mr. L. W. Denney,

Mrs. W. E. Denney, Mrs. Olin McIntosh.

July 28, Ephesus, school building; committee—Dr. P. L. Burgess, Mr. Frank Rogers, Mrs. B. R. Wood.

For Colored People

July 29, Glenn, school building; committee—Rev. J. S. Scrivens, Rev. Adam Dunson.

County Health Committee—Dr. A. G. Wortham, chairman; Mr. P. T. McCutchen, sub-chairman; Mrs. P. T. McCutchen, secretary.

The above named committees are requested to circulate the news of these examinations and urge the mothers to take advantage of this opportunity by bringing their babies and children to be examined free of charge.

Request mothers to bring a large towel to wrap their baby or child in while being examined, also extra diapers for the baby, cup for the baby.

A committee of two to help with records at each clinic.

What is the Healthmobile?

The purpose of the Healthmobile is to make infant and maternal hygiene mobile; to bring information concerning these subjects to the people who have not realized the need of it and to remove a part of the mystery surrounding disease and death so that the loss of over 5,000 babies and 700 mothers annually in Georgia can no longer be considered providential.

This work has been made possible by the generous gift of the National Phi Mu Sorority of the Healthmobile to the Georgia State Board of Health four years ago. This organization has also given a sum of money equal to that of the appropriation from the Sheppard-Towner fund for the support of the unit. For this reason preference is given to babies and children of preschool age. The work is uder the direction of the Division of Child Hygiene, State Board of Health

The value of the examination of babies and children consists in the knowledge obtained of conditions existing in various sections of our state, so that we may know what relief measures need to be taken. Since finding that large numbers of rural children have uncorrected physical defects, the State Board of Health has made arrangements with many of the hospitals for special rates in cases where operations are necessary upon children whose parents can not afford the usual charges. The principal railroads have agreed to give transportation to the child and parent at one half fare.

In addition to a physical examination of each child, an individual conference is held with each parent, in regard to the child's habits of eating, sleeping, playing and his personality traits. Advice is given in regard to the correction of any physical defects, the formation of good habits, regular hours, diet, and sunbaths. No medical treatment is given, but where it is needed consultation with the family physician is urged.

Movies, explaining the cause and prevention of diphtheria, hookworm, malaria, and smallpox, are shown in each community. Other movies, illustrating the care of the teeth, health habits, good posture and the organization and work of Children's Health Centers are shown.

ATLANTA, GA., Constitution

AUG 1 1927

SCREENED QUARTERS FOR NEGROES URGED

Americus, Ga., July 31.—(Special) Dr. W. H. Houston, county health officer here, is urging farm owners to provide screened living quarters for their negro tenants. This, according to Dr. Houston, in combination with adequate rural sanitary drainage will permanently solve the public health problem of Sumter county.

Already, he says, general conditions here are excellent, but he insists that if the work already accomplished here is to bring the best results to residents here that certain sanitation and drainage problems must soon be undertaken and carried to successful conclusion.

Health - 1927

Illinois

Ask Mayor Thompson to Aid in Health Campaign

(Photo on

A delegation of 27 citizens, representing nearly as many organizations, waited upon Mayor William Hale Thompson Tuesday afternoon in his suite at the Sherman hotel to bring to his attention the deplorable conditions responsible for the recent health report so forcibly emphasized by the department of health in its survey. In petitions signed by more than 500 persons Mayor Thompson was asked to take a personal interest in seeing that health conditions are remedied.

Bishop A. J. Carey, civil service commissioner, and Hon. Oscar DePriest, assistant commerce commissioner, acted as spokesmen for the body. Bishop Carey, in introducing Dr. Carl G. Roberts, chairman of the executive board of the Cook County Physicians' association, said:

"Mr. Mayor, I know you have before you one of the most representative bodies you have had the pleasure of meeting. It is made up of the most sincere and forward-looking citizens of Chicago." Dr. Roberts then read the following petition:

The Petition

To the Hon. William Hale Thompson, Mayor of the City of Chicago
Greetings:

Whereas, We, the undersigned members of the Cook County Physicians' association, practicing in the city of Chicago, county of Cook, and the citizens of Chicago, having been informed of the excessive death rate from tuberculosis among the Colored people, as published in a recent survey made by the department of health; and

Whereas, A recent investigation has disclosed that there are approximately 962 white patients, as contrasted with 45 Colored patients, undergoing treatment in the Municipal Tuberculosis sanitarium, a proportion entirely out of keeping with the effective remedying of the serious situation so forcefully emphasized by the department of health; and,

Whereas, The high incidence of tuberculosis among these people places the greatest responsibility upon the shoulders of Colored physicians who have in charge the medical care of this group; therefore, be it

Resolved, That in view of the above facts, as disclosed in this survey, we, the members of the Cook County Physicians' association, members of the undersigned civic, professional, political, religious and fraternal organizations and citizens of Chicago, do hereby petition the Hon. William Hale Thompson, mayor of the city of Chicago, to use his influence with the board of directors and staff of the Municipal Tuberculosis sanitarium, to the end that the number of Colored admitted shall be determined upon the basis of the increased incidence of tuberculosis among this group of people who need it most; and be it further

Resolved, That we, the Cook County Physicians' association and citizens of Chicago, respectfully petition the mayor, Hon. William Hale Thompson, to use his influence to secure the anpointment of members of this association to the staff of the Municipal Tuberculosis sanitarium and its dispensaries.

Whereas, We are aware of the high death rate from preventable diseases among the infant and adult Colored population in our community; and,

Whereas, It is our belief that the said mortality statistics among this group is due to a number of reasons—viz., bad housing, inadequate hospital facilities on the South side and a lack of initiative in the enforcement of sanitary laws as regards the active demolishing of condemned property, and which in turn forms the basis of the present high mortality rate; and,

Whereas, The high death rate among this group helps to increase the mortality rate of the entire city, and if not decreased may cause Chicago to lose its prestige as the healthiest large city in the world, be it

Resolved, That in view of the foregoing facts we respectfully petition his honor, Mayor William Hale Thompson, to appoint a physician of the Colored people as an assistant to the health commissioner, whose duty it shall be to make a study of and remedy the above conditions; and be it further

Resolved, That on all matters pertaining to the health of the people residing in these communities the authorized representatives of the Cook County Physicians' association be consulted, so as to prevent the release for publication of data that might result in a social and economic loss to the people concerned, and that in conducting surveys or appointing to positions in the department of public health affecting our group, outside the realm of the civil service, the Cook County Physicians' association be consulted.

Whereas, We are reliably informed that successful attempts at segregation of school children along racial lines are said to have been made by district sunerintendents and principals of schools and said to have been aided and abetted by certain members of the board of education; and

Whereas, such practices are unlawful under the laws of the state of Illinois and are un-American, undemocratic and will, if continued, affect the present high standing in which the Colored citizens of Chicago are held throughout the country; be it further

Resolved, That we respectfully petition the Hon. William Hale Thompson, mayor of the city of Chicago, to appoint a member of his Colored constituency to the board of education.

Whereas, A committee of the Chicago Medical society, composed of Drs. Frank Billings, Charles J. Whalen, R. B. Ferguson, F. R. Morton, M. L. Harris, Jeremiah H. Walsh and William Allen Pusey, has made an extensive and exhaustive study of the hospital situation in Chicago, as published in the May, 1927, issue of the Illinois Medical Record, and has arrived at the conclusion that there is a pressing need for more hospital beds in Chicago, especially on the far South side; and

Whereas, In this study the committee has recommended a system of city or county maintained hospitals in outlying parts of the city; and

Whereas, We, the members of the Cook County Physicians' association, have long felt this need because of the death of many patients while en route to County hospital from the South side, and we, the members of the Cook County Physicians' association and physicians practicing on the South side, are in hearty accord with the published report of the committee of the Chicago Medical society, be it further

Resolved, That we respectfully petition the Mayor, Hon. William Hale Thompson, to use his influence in securing for the South side a city or county maintained institution which shall be open to all physicians, nurses and patients, without regard to race, creed or color.

Blames Former Mayor

Mayor Thompson in his reply said he had knowledge of conditions as cited in the petition and appealed to his hearers to place the blame for them on the previous administration, where it belonged.

"I fear that by circulating this petition you will knowingly deal me a savage blow unless an explanation of the surrounding facts are clearly stated. The impression will go out that I am responsible for this state of affairs, whereas I have had nothing to do with them. They are the result of Dever's rule. The sanitarium was filled when I came in. On Dever's school board I found a conspiracy to keep me from getting control for three years. I am trying hard to straighten out things. I removed Bundesen because I did not like his police tactics in removing sick persons from South side homes and replaced him with a man whom I knew would be sympathetic."

The mayor declared that he had signed a petition for a model home building plan to relieve the housing condition on the far North side, with the understanding that as soon as possible the same plan would be inaugurated on the South side, where most needed.

He asked that tact be used in handling the matter to guard against misconstruction, especially by the newspapers. He indicated that, following his suggestions, the requests presented in the petition would receive careful consideration and that the organizations sponsoring the movement were assured of his co-operation.

Others in the delegation were: Dr. James A. Allison, president of the Cook County Physicians' association; Dr. S. W. Smith, secretary; Drs. Roscoe C. Giles, W. W. Gibbs, Troy Smith, J. H. Howard, Charles Thompson, Robert McEwen, Spencer Dickerson, Editor Robert S. Abbott, George R. Arthur, C. H. Talley, Sandy W. Trice, Leonard G. Outlaw, A. L. Foster, Robert Ephraim, Mrs. Georgia Martin, Mrs. Lula E. L[illegible] son, Mrs. Leonard G. Outlaw, [illegible] Nannie Reed and Miss Zelma W[illegible] on.

BUNDESON ACTS

Commissioner of Health Herman N. Bundeson, of Chicago, has launched a health survey among the black people of Chicago and has secured the finances from the City Council through an appropriation. Alert citizens among us spurred on by the intelligent action of Dr. Lewellyn Harris have secured this much needed and invaluable assistance from the Health Commissioner and it is to be expected that further light will be brought to the surface in regard to the high mortality among our people.

The committee on the survey is empowered and directed to test the accuracy of the reputed death rate among black people in Chicago, and ferret out the causes and to suggest a workable plan for correction.

The death rate of our infants has been all out of proportion with that of the other racial groups. Tuberculosis and pneumonia are persistent emissaries of death among our people and this health survey will no doubt make recommendations in regards to sanitation and hygiene in our communities. Such yeoman service as Commissioner Bundeson is giving to our people service that proposes to alleviate human suffering and prolong human life cannot soon be forgotten and it is hoped that full co-operation will be given to the committee. This is constructive service to society and should be inaugurated in every city in the United States.

PERIODIC HEALTH EXAMINATIONS

The periodic health examination is a simple procedure whereby a person visits his physician at regular intervals and receives a complete examination. Most people wait until sickness enters their bodies before they put in a "hurry up" call for help. Wise men like bankers, presidents of railroads, insurance companies, etc., that desire to live long, pay a physician by the year to keep their body in trim. The Chinese pay a physician as long as they are well, as soon as they become ill the physician's pay ceases. While many of us cannot afford to hire a physician by the year, we can afford to visit a good physician and have a general examination once or twice a year.

The periodic health examination is especially important with the young and those past middle life. In the growing child unhealthy tendencies can be corrected much easier than if they are allowed to develop into permanent disabilities in the grown-up. Errors in posture and diet, defects in vision, hearing and speech, minor cases of heart trouble, a tendency to lung and other troublesome conditions can be found out in time to prevent them doing permanent and serious damage.

Many of the diseases and disabilities that strike people down in the prime of life have their beginning in childhood, and of these tuberculosis is the outstanding example. Many of the cases of this disease that first appear among young adults really begin in childhood. But the live, active youngsters are able to keep down the development of the disease until the greater cares of work or study reduce their resistance and the disease gets a start.

In the middle aged people other diseases show themselves. It is then that cancer begins, heart diseases increase, kidney troubles appear and the blood pressure rises. The early signs of these conditions can be recognized by a physician often before the person himself is aware of their presence. Taken in time they can be done away with or at least, controlled.

A periodic health examination means years added to your life and the saying that "the good die young" will soon be changed to the good-for-nothing die young.

New Cures for 3 Million Sick Urged by Mayo

Three million people are on the sick roll every day in this coutry, and medical science must be directed to find at what age workmen give way and if possible stop in its incipiency the disease that kills, Dr. Mayo said yesterday.

He was one of the speakers at a gathering in the Union League club to promote the Dr. Albert J. Ochsner Foundation as a research institution of the American College of Surgeons, seeking the best application of medicine and surgery as separated from research into cause of disease.

The sickness of these 3,000,000 persons, many of whose cases are helpless, is costly beyond imagination, he said, and emphasizes man's desire to die suddenly, thus saving him long periods of suffering and saving his family money that would come in handy to the survivors.

Diabetes Widespread.

"Persons over 50 years old are not healthy; they just don't know what's the matter with them. Railroads, examining their employés, find that 2½ per cent have diabetes. Through studies the average age of men has increased four and one-half years, and while we are alive we want to be well."

He praised the work to be done by the Ochsner foundation, and declared that the money of his own institution at Rochester, Minn., would go back to the people in carrying on research work.

Dr. Herman N. Bundesen, commissioner of health, supplemented Dr. Mayo's remarks by saying there are several kinds of examiners who periodically make sure that banks are safe and sound, but that if the modern banker or business man didn't know any more about the condition of his business than he does of the condition of his body he would be bankrupt.

"Audit your health," he warned. "Some people claim the Bible says man should live three score and ten years. If you will read the Bible you will find the Lord intended man to live 110 years at least. We're not here to add more years to your life, but to add more life to your years.

"Twenty to twenty-five persons die every day in Chicago—needlessly. Find out what your health reserve is and don't live beyond it."

George M. Reynolds, Melvin A. Traylor, and other bankers were at the gathering at which Angus Hibbard presided. Five thousand dollars was subscribed for the Ochsner foundation during the speaking, and a committee was formed to carry on.

APPROPRIATION TO STUDY HEALTH GIVEN BY CHICAGO CITY COUNCIL

Health Commissioner Herman N. Bundeson, Alderman Louis B. Anderson, 2nd ward, and Alderman Robert R. Jackson, 3rd ward, have secured an appropriation from the City Council with which to make a survey among colored citizens of Chicago with a view to reducing the high mortality rate.

The appropriation was made by the City Council, after a committee had made a preliminary survey of the situation and submitted a report recommending that a thorough scientific survey be made to answer any doubts as to the accuracy of the statement of the high death rate, to ferret out the cause for such a rate and to suggest a workable plan for correction.

The Director of the survey will be Dr. H. Llewellyn Harris, who has been prominent in the work of the Health Department for some years. The personnel of the staff thus far named includes Dr. L. A. Tancil, Dr. Frank J. Hawkins, Dr. Jasper T. Phillips, physicians; Mrs. Laura A. Thurman, Miss Ruth C. Baskin, Miss Willie M. Winston, Mrs. Mable Alston, Mrs. Daisy M. Moten, Miss Ingle Marie Butler, nurses; and Miss Hattie B. Lewis, Miss Lula Gould, Miss Edith Gibson and Robert N. De Iamette.

Herald & Examiner
CHICAGO, ILL.
MAY 15 1927

NEGRO DEATH RATE HIGH HERE

Negro mortality in Chicago is more than twice that of white residents, according to a survey conducted by Dr. H. L. Harris Jr. for the Elizabeth McCormick Memorial Fund and submitted yesterday to Health Commissioner Bundesen.

Dr. Harris' report suggests the need for greater education, improvement of hospital, prenatal, infant welfare, day nurseries and outdoor recreational facilities among the estimated 160,000 colored population.

While deaths of white residents are calculated at 10.8 per cent per 100,000 population, the rate among Negroes is 22.5 per cent, according to his report.

Herald & Examiner
CHICAGO, ILL.
MAY 24 1927

Negroes Ask Park to Combat Phthisis

Tuberculosis among Negroes in Chicago is increasing alarmingly, the South Park board was told yesterday by Mrs. Mary McDowell, former city commissioner of public welfare. She led a delegation of Negroes, headed by Alderman Robert R. Jackson, who asked that the board buy a playground between Thirty-seventh and Thirty-ninth sts., and Rhodes and Vernon avs. The board ordered its engineers to survey the ground.

NEWS
CHICAGO, ILL.
APR 13 1927

TEACH COLORED BOYS TUBERCULOSIS DANGER

More than 700 Negro boys who have been playing in the streets with utter disregard for poor sanitation in spots where they make their play headquarters now know the symptoms of tuberculosis, one of the most devastating diseases in the list that runs up the colored death rate in Chicago.

The figure was announced today after a computation of registration at

the first week of the health show being conducted at the Wabash avenue Y. M. C. A., 3763 Wabash avenue. Thirty-two Negro physicians and dentists who have been co-operating with the association examined every one of the boys and turned "suspect" cases over to city dispensaries.

Although the dreaded "T. B." has twice as many victims among the city's colored population as among the whites, the doctors pointed out, Chicago has the lowest Negro death rate from tuberculosis of the American cities. And since the mirgration to the north, they declare, a 42 per cent reduction in tuberculosis deaths has been recorded.

Co-operating with the association in the health show, which will continue until April 19, are the Municipal Tuberculosis sanitarium, the Chicago Tuberculosis institute, the National Medical association, the Infant Welfare society, the Society for the Prevention of Blindness, the Cook County Physicians' association and the National Dairy association.

Chicago Death Rate High Among Negroes Survey Indicates

By JOE BLOTKIN.

CHICAGO, Nov. 11. — The recent health survey in the Negro communities of Chicago proves the Negro death rate is twice as high as that of the city as a whole. In 1926, the survey reports, almost 10 per cent of Negro babies died in their first year. The tuberculosis death rate is six times as high among the Negroes as among the whites.

The reasons for this is very obvious if one would only see how the Negro works in cesspools of blood like in the great Chicago stock yards, and other such health-breaking industries.

Poor and Overworked.

Pneumonia deaths are 30 per cent more numerous them among the whites. Deaths caused from diseases of infancy are 50 per cent higher. This is not only because of the miserable working conditions. The Negro communities are the poorest in the city.

It has also been shown by the health department survey that the schools in the Negro sections are conducted in a more careless manner than those in the rich sections. Control of contagious diseases in public schools which children of poor workers and Negroes attend is not efficient. The health survey commission reports these are the primary reasons for [illegible] high death rate among

The Grist Mill.

By
PATRICK B. PRESCOTT, JR.

1.—Dr. Llewellyn Harris' Survey.
2.—The Turn of the Wheel.
3.—Bishop Edwin H. Hughes Speaks.

In the Chicago Journal of Tuesday, November 8th, there was an editorial regarding the Health Survey among the colored inhabitants of the City of Chicago. This splendid bit of constructive work was done under the direction of Dr. H. L. Harris, Jr., who happens to be a colored man. It is natural and perhaps wise, that a man of color was selected to head this particular job. For by this means the community may be assured that there is no bias, or prejudice, in the report. It can be assured that there certainly is no attempt on the part of the survey committee to arbitrarily color the health statistics among colored people so as to reflect upon them as a part of the body politic.

Especially, therefore, because of this absolute fairness in the report, its data is to be tkaen with the utmost degree of seriousness. For instance, when the report points out that the death rate among the colored population of the City of Chicago is twice that of the white, you may be assured that it is not done to reflect upon colored people but rather to correct an evil that is sapping the vitality of the race. Indeed, there is little or no doubt that Dr. Harris more than anyone else concerned regrets to have to admit to the world that this conditions true.

In 1926 the death rate for the entire city was 11.68 per 1,000. But among the colored population, it was 22.8 per 1,000 This is nearly twice as great. It might also be added twice as grave. The death rate among babies if fifty per 1,000 greater among those of color, while the tuberculosis death rate among the colored population of the city is six times that of the whites.

This latter, surely, is appalling. It points out the fact that something definite and comprehensive must be done. Hygiene and sanitation must be improved. Overcrowding in the various communities must cease. There is nothing fundamentally wrong with colored people physically. It is the unwholesome conditions into which they are catapulted that are the cause of distress. In short, it is economic.

A bit of lawn, a bathroom for every home, an indoor toilet, some sunlight, some fresh air, enough house space to insure individual privacy and wholesome food will make any group of people anywhere among the healthiest in the world. There is no great mystery to it. The simple fundamentals of life are all that are necessary.

Dr. Harris, working under the Health Department of Chicago is to be congratulated for pointing out this need in no uncertain terms. It is to be hoped that it will produce equally definite results

TRIBUNE
CHICAGO, ILL.

OCT 31 1927

BUNDESEN ACTS TO REDUCE NEGRO DEATH RATE HERE

Conditions Poor, Health Survey Shows.

Conditions shown by a health survey of Chicago's Negro population, made public last night by Dr. Herman N. Bundesen, commissioner of health, disclose a situation which in his opinion justifies vigorous and immediate corrective measures. One fact developed by the study is that the death rate among Negroes is about twice that of the rest of the population.

In the case of preventable diseases as cause of death the Negro mortality is shown to be practically six times as great from tuberculosis as that of whites.

Urges Facing of Facts.

"Negro health conditions will be improved in Chicago and elsewhere not by denying, but by honestly facing the facts, and taking the corrective measures which the facts demand," Dr. Bundesen says in his bulletin, the highlights of which are as follows:

"The Negro death rate is twice that of the city as a whole. The rates, figured on a population of 3,048,000 total, and 160,000 Negro, population for 1926 are 11.68 per 1,000 for the entire city and 22.8 per 1,000 for the Negro population.

"Infant mortality for the entire city was 64.6 per 1,000, while that for Negroes was 94.7 per 1,000. The largest losses of life among Negroes are from highly preventable diseases and comparative rates were: Tuberculosis, white, 58.5; black, 348.5, and pneumonia, white, 88.8; black, 114.7.

Poor in Health Agencies.

"The communities in which Negroes live in largest numbers are poor in health-serving agencies. The department of health will act to remedy this condition.

"The work of contagious disease control in the public schools shows a wide variation in efficiency. Closer supervision seems necessary. There is also urgent need for more extensive correction of defects, for positive health teaching and for an extension of facilities for the care of the school child."

Director of Disputed Health Survey Dismissed

Dr. I. S. Falk, director of the division of surveys, Chicago health department, was dismissed Thursday by Dr. Arnold H. Kegel, health commissioner, who was appointed three weeks ago to succeed Dr. Herman N. Bundesen. Dr. Falk, who is an instructor in bacteriology at the University of Chicago, directed the recent three months health survey of the Race population in the city which brought forth heated protests from prominent individuals and civic organizations. The dismissal of the director followed closely the presentation to Mayor William H. Thompson Tuesday of protests presented by a number of civic organizations headed by the Cook County Physicians' association. The mayor's attention was called to the inaccuracy of the survey and the results that might occur from such official statistics.

Health - 1927

Illinois.

Dr. TROY SMITH

Gives Expert Advice on the Prevention on Disease.

SYPHILIS AND THE NEGRO

Dr. A. Wilberforce Williams of Chicago, who has probably done more than any other physician in America in educating his people about various diseases and especially the social diseases and Dr. Rachell Yarrows who occupies a simlar position among the whites, exchanged views at a recent meeting sponsored by the Chicago Urban league concerning social diseases among Negroes.

Both agreed that syphilis was a disabling disease. It is the cause of the majority of cases of insanity, the cause of repeated miscarriages and childless marriages. It is likewise the cause of much pain and suffering in the human race.

The increased prevalence of syphilis among the Negro was attributed to his lack of knowledge concerning the social diseases. The problem is one of educating the Negro about the general knowledge of this disease, with special stress laid upon its mode of spread, its prevention, the mode of diagnosing and its means of cure.

In comparing the prevalence of this disease between the white and the Negro race, the figures are always higher than we like to admit. Vedder in routine Wassermann examination of 1,577 white soldiers found 16.08 per cent positive, including the doubtful cases. Among 1,472 colored troops the percentage was 36. Among 201 pregnant white women Vedder found 70 per cent did have syphilis while among 662 colored pregnant women 58 per cent did not have syphilis. The same type of investigation carried on by Moore showed 9.5 per cent with syphilis in white pregnant women and in 28.5 per cent of the colored pregnant women with syphilis. McNeil, in 1916, found 24 per cent among male colored accident cases with syphilis. Of 12,545 white food handlers, reported by Keller, 5.7 per cent had a positive reaction while 17.7 per cent among 3,000 colored food handlers were positive. Just three times as many.

These figures show that there is need for a great educational campaign to be launched to acquaint our people with a clear knowledge of this disease. The whites have had advantage of educational propaganda, why don't you take advantage of the same thing?

Chicago, Samuel Insull and Dr. Algernon B. Jackson. The latter is a professor at Howard university and a director of public health in Washington-D. C.

TRIBUNE
CHICAGO, ILL.

FEB 13 1927

...EGRO PRESS OF U. S. TO LAUNCH HEALTH PROGRAM

The National Negro Press association will hold its 28th annual convention in Chicago from Feb. 17 to 19, Melvin J. Chisum, secretary of the association, announced last night. It was announced that the association will launch a national campaign to improve the health conditions of the colored people.

Among the speakers scheduled to address the convention are Health Commissioner Dr. Herman N. Bundesen of

ANOTHER AMERICAN TRAGEDY,

Theodore Dreiser took a newspaper story of the drab ending of a sordid romance of American youth, complicated with middle class [illegible] and [illegible] rolled impulses, and turned it into an absorbing two volume tragedy of modern American life. Carl Van Vechten pu another American youth of just as weal moral stamina and greater ambitions ir the hectic heat of Harlem night life, witl all his strivings for success frustrated through the incident of his color, and produced another American tragedy More recently, the editor of the Chicago Journal of Commerce, in reviewing the conditions surrounding the Negroes of that city, pronounced the problem of discouraging immigration of that sort through the denial to the race of decent facilities for living as constituting one of the basic tragedies of American life.

According to this editor, more than five per cent. of Chicago's population consists of Negroes, their numbers having been increased through Southern immigration to 160,000. In 1925 the death rate in Chicago was the lowest of any city of a million or more, it being 11.5 per thousand. But the death rate among the Negroes was 22.5, "a rate exceeded only by two of the most unhealthy cities of the world, Bombay and Calcutta." The causes for this execssive death rate among this class of Chicago's population are directly charged to municipal and civic neglect to provide the Negro sections with agencies that promote health. An important factor in prolonging these conditions is said to be the opposition of the whites of Chicago to continued Negro immigration. Any effort to give the Negroes decent living facilities, they argue, would tend to encourage increased immigration.

This argument is stigmatized by the editor of the Journal as revolting to the sense of fair play and as indicating that the essential injustice in the entire Negro problem is the injustice of the white man to the Negro. The modern American attitude toward the Negro is denounced as often far crueler than the average attitude of the Southern slaveholder. "To look coldly upon the Negro of today and to say that his babies shall not have a fair chance to overcome tuberculosis and all the other diseases that threaten them. To advocate such injustice as an indirect means of discouraging Negro migration to a community is cruelty of a peculiarly cold and inhuman kind."

This happens to be the peculiar phase of the American tragedy of the Negro presented in Chicago. The editor of the Journal has presented it in such a striking manner as to arrest public attention and to enlist public sympathy. The result of the work of securing a remedy for these deplorable living conditions should be up to the Negroes themselves. With Chicago in the throes of a three-cornered political campaign, in which the Negro vote should constitute an important factor, there should be some way of making that vote count for the correction of the ills that contribute to making the racial death rate double what it ought to be.

Chicago Survey Reveals High Mortality Rate

CHICAGO.—Mortality among Negroes in Chicago is twice that of the whites, according to survey just completed by Dr. H. L. Harris, Jr. Although Chicago had the lowest death rate of any [illegible] in 1925, being 11.5 a thousand, Negro residents were dying faster than any city dwellers outside the world's most unhealthful cities—Bombay and Calcutta.

The death rate among Negroes here was 22.5, in the Second and Third wards, populated almost exclusively by Negroes. Negro infants died at the rate of 118 a thousand, as compared with 71 a thousand among the whites. The Negro death rate from tuberculosis was six times that among whites and deaths from pneumonia were three times as frequent.

In the Second and Third wards where a majority of the 160,000 Chicago Negroes reside, Dr. Harris found the death rate nearly as high as that of the city in the old, insanitary days, forty years ago before the health department was organized.—Los Angeles Times.

CHICAGO, ILL.

MAR 21 1927

...RATE IN CHICA... UNUSUALLY HI...

Because of an appalling lack ...fant welfare stations, clinics, ...pitals, park and playgrounds in 2d and 3d wards, the negro death ... for Chicago, more than twice for the entire city, will continue v... out improvement until public opi... demands the necessary health ag... cies in the negro districts.

Such is the conclusion reached ... Dr. H. L. Harris Jr., in an article pu... lished by the Social Service Review, ... quarterly issued by the University of Chicago.

Altho Chicago in 1925 had the lowest death rate of any city of a million or more population, the negro death rate of 22.5 per thousand, Dr. Harris finds, is exceeded only by two of the most pestilential cities in the world, Calcutta and Bombay.

The infant mortality rate in Chicago's black belt is 118 per thousand, as compared with seventy-one for the remainder of the city; negro deaths from tuberculosis are six times those of whites, and pneumonia death rates three times greater, Dr. Harris points out.

Negro Death Rate Twice White Due To Bad Housing

Negroes in Chicago have a death rate more than twice that of the whites, and an infant mortality rate of 118 (per thousand) as compared with 71 for whites. More than six times as many Negroes as whites die from tuberculosis and syphilis; more than three times as many from pneumonia. The Negro death rate from tuberculosis for the past 12 years shows no appreciable decline. It has increased rapidly since 1924.

These facts are cited by H. L. Harris, M. D., in an article, "Negro Mortality Rates in Chicago," appearing in the first (March) issue of the Social Service Review, a new quarterly issued by the University of Chicago. They were admitted by Chicago's Health Commissioner, Dr. Herman N. Bundesen, in conference with members of the Negro Health Committee, shortly after publication of a bulletin by the Health Department showing that for 1925 Chicago had the lowest death rate of any city of a million or more population. Dr. Harris, a colored physician, analyzes some of the conditions causing this discrepancy in the mortality rates between white and Negro citizens—notably the lack of public health services and adequate housing in the congested area where the 200,000 or more Negro workers live.

NEGRO DEATHS ALARM CHICAGO

Although City Has Low Death Rate, Colored Citizens Die Fast.

CHICAGO, March 23.—The alarming amount of Negro deaths in Chicago during the past year have caused grave concern among medical authorities of the race in that city.

Though Chicago had the lowest death rate of any great city in 1925 its colored citizens were dying faster than any city dwellers outside the world's most unhealthy cities, Bombay and Calcutta.

A report by H. L. Harris, Jr., appearing in the Social Service Review, a University of Chicago publication, issued Monday, gave startling statistics on the death rate among the colored citizens of Windy City.

The general mortality rate was 11.5 per thousands, but the colored American's death rate was 22.5, according to Dr. Harris. Colored infants are dying at the rate of 118 per thousand, compared with the white rate of 71. Death rate among the colored Chicagoans from tuberculosis was six times that of whites and from pneumonia three times as great.

RACE DEATH RATE ALARMS CHICAGOANS

Grave Concern Among Medical Men Over Tremendous Proportion of Deaths Occuring Among Race.

CHICAGO, Mar. 23.— The alarming amount of Negro deaths in Chicago during the past year have caused grave concern among medical authorities of the race in that city.

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Dr. TROY SMITH

Gives Expert Advice on the Prevention on Disease.

FIGHT TUBERCULOSIS

The attention of every one in Chicago should be called to the alarming increase of pulmonary tuberculosis or consumption among the Negroes of this city. This increase is found in the newer inhabitants, in those that have recently come to this city from the southlands. Health authorities report that the death rate from this disease alone is six times higher in the Negro than in the Caucasian.

Various agencies are at work fighting this dreaded disease. Chief among these are the Chicago Urban League and the National Medical Association. They have arranged a series of meetings in connection with "Negro Health Week" whereby the public can be intelligently informed concerning the prevention of tuberculosis and other diseases prevalent among the Negro.

There is need for a great deal of social service work in connection with the prevention of tuberculosis. Education of the poorer classes is one of the keynotes of prevention and is the place where the fight should be directed. It is a known fact that poverty and tuberculosis go hand in hand. Don't suffer the health department to fight your own battles, but if everyone with sufficient intelligence should instruct his family oncerning the prevention of tuberculosis the mortality rate would soon be decreased.

No class of society however is exempt from tuberculosis, but the disease is more prevalent among those that have insufficient nourishment, bad ventilation, insufficient light and general filth. Tuberculosis frequently follows mental strain, shock or worry. It is a common thing to find tuberculosis among students that have overtaxed their minds, especially women students. Other brain workers like clerks, lawyers, physicians and clergymen develop this disease as well as tradesmen and manual laborers. Tuberculosis often follows such diseases as neglected colds, influenza, pneumonia and other debilitating diseases.

In regard to conditions which makes an occupation favorable for the development of tuberculosis are:

1. Low wages, entailing poor home conditions.
2. Insanitary conditions of place of employment.
3. Close confinement within doors.
4. Exposure to excessive heat.
5. Temptations to intemperance.
6. Long and irregular hours.

TRIBUNE
CHICAGO, ILL.

MAY 15 1927

NO WEST S. WARDS LEADING CITY'S HEALTH

Lowest Death Rate in the 22d and 24th.

hicago's two healthiest wards, ed on mortality rates, are the 24th the 22d, located in the heart of west side, according to a report st omitted yesterday to Health Commissioner Herman N. Bundesen.

Despite the popular belief that the north and south side lake shore neighborhoods excel as the best places to ive and raise a family, the death statistics indicate otherwise. The 34th and 36th wards on the northwest side rank third and fourth on the health ist.

World's Healthiest Large City.

The ward mortality figures were compiled by Dr. H. L. Harris Jr., for the Elizabeth McCormick Memorial fund from health department records, which show Chicago, as a whole, the healthiest large city in the world.

Aside from the congested 27th ward, which ranks lowest on the list, the greatest death rates are recorded in the 2nd and 3rd wards, which include eighty per cent of the city's Negro population. Mortality rates among the colored people, the report shows, are twice that of the whites.

Colored Death Rate High.

Although Chicago's health is reckoned as better than that of New York Paris, Berlin, or any of the other large cities, the colored district ranks with that of Bombay, India. Infant mortality is almost twice as great as that of the whites, tuberculosis twice, and pneumonia three times as great.

Dr. Harris proposes, as remedies for the Negro health situation, more and better hospitals for colored people more parks, better school equipment and a concentrated educational campaign by the health department and other health agencies.

Health – 1927

Kentucky

TUBERCULAR CLINIC AT SUNSHINE CENTER

The Board of Tuberculosis Hospital which operates Waverly Hills Sanatorium and the Tuberculosis Dispensary at the City Hospital, is opening a Chest Clinic at the Sunshine Center, 1023 W. Madison Street on next Tuesday afternoon, February 1st, at one o'clock. Dr. E. R. Garnert will be the physician in attendance at the clinic assisted by Dr. Henry W. Rand, resident physician of the colored hospital at Waverly Hills. The Board is opening this Clinic in response to a request from members of the Falls City and Inter-Collegiate Medical Societies. It is the hope of these societies and the Board that this clinic shall be of grea service to the residents of this neighborhood.

We want the public to know that this clinic has the endorsement of both Colored Medical Association, and that great pains will be taken to see that ailments of the chest are carefully examined and diagnosed correctly.

There is no gainsaying the fact that Tuberculosis is very prevalent among the Negroes in Louisville, and that the death rate among Negroes from this disease alone is appalling. The prevalency of Tuberculosis in Louisville among both races, particularly marked among Negroes, is a challenge to the medical profession, and we are asking the doctors to enlist their support one hundred against this challenge. As long as the Physicans, who are the guardians of public health, remain indifferent to the ravage of such a prevalent disease, just so long will Tuberculasis continue to exact its toll yearly. The clinic will open Feb. 1, and will be opened Tuesday and Thursday Thursday from 1 to 3.

LOUISVILLE, KY., Post

APR 5 1927

SPEAKING MARKS OPENING HERE OF COLORED CLINIC

A tuberculosis clinic at Sunshine Center, 1023 West Madison street, where colored men women and children are examined, was scheduled as one of the principal activities of Tuesday's observance of Negro Health Week, April 3 to 10, under the auspices of the Health Council of the Community Chest and the Inter-Racial Commission. Four health talks were also to be given.

The student body at Central High School was scheduled to hear Dr. J. M. Hammons speak on health at 11 o'clock this morning, and that of Simmons University at the same time hearing Dr. J. H. Walls. Two talks were to be made before the employes of the R. J. Reynolds Tobacco Company, Swan and Kentucky streets, at 11:15 o'clock, when Dr. Richard Oliver was to speak and at 12 o'clock noon with Dr. N. M. Turpin as speaker.

The clinic was to be held from 1 to 3 o'clock this afternoon with colored physicians in charge. It will be held again Thursday during Negro Health Week, and is held every Tuesday and Thursday at the same time.

The average negro death rate during the past six years, 1920 to 1925 inclusive, has been 22 per 1,000 population, it was pointed out by the negro physicians' committee, while the birth rate was only 15.6 per 1,000, an excess of 6.4 deaths over births yearly. Computing the loss in negro population on the special census of 1925 which recorded 46,800 negroes in Louisville, the average loss for the past six years has been 300, or nearly 2,000 for the entire period. The race is liable to dwindle and eventually disappear, the committee said, unless conditions change and there is a considerable influx from the outside.

The State Board of Health and the Kentucky Inter-Racial Commission are in charge of the observance of Negro Health Week throughout the State. The observance is nation-wide in scope and negro health activities are being carried on throughout the United States.

Health-1927

Louisiana.

Dr. Oscar Dowling, President of the Louisiana State Board of Health, in his crusade against impure milk found that the milk served from the dairy of a New Orleans Negro was the purest, cleanest and highest above the minimum standard set, of any dairy, distributing agency hospital or other institution. *Well, well! Try that over on your piano!*

Minden Herald
Sept.
APR 29 1927

NEGRO BABY CLINIC IS BIG SUCCESS

The first negro health clinic for colored babies in North Louisiana and probably the first in the state was one of the features of the observance of the National Negro Health Week Program among the negroes of Webster Parish and Minden.

"The Negro people of the United States are to be congratulated on the fact that during the period from 1910 to 1920 the death rate in at least some Southern States decreased among Negroes more rapidly than among the white population. Notwithstanding, however, the rate remains higher among the colored. Throughout most of the South the infant mortality rate also is higher among the colored people

But the warfare of the colored people against disease and general ill health has only begun. Continued effort on a larger and more effective scale each year will bring new conquests of man's disease enemies, with higher standards of health and efficiency.

The thirteenth annual observance of National Negro Health Week will commence April 3, 1927, under the auspices of the Tuskegee Negro Conference and the National Negro Business League, with the assistance of Federal, State, county, and municipal health authorities and various civic organizations.

National Negro Health Week for 1926 was distinguished by a larger cooperation from health departments than ever before. This record accomplishment should be excelled in 1927. Concern for health betterment, not only during Health Week but throughout the year, is a highly essential and productive racial activity and deserves the hearty support of every man, woman, and child.

The Clinic for Negro Babies, was successfully held last Friday, April 22nd, in the Webster Parish Training School.

It was conducted under the auspices of the principal of the negro training school, Prof. J. L. Jones, and ably assisted by Dr. J. L. Johnson. It was sponsored by the Webster Parish Health Unit.

There were 185 babies examined and graded. The school house was filled with parents and children, who not only came from Webster Parish, but from neighboring parishes. Announcements previously made in the churches assured the success of the clinic. The colored populace of Webster parish has been very eager to obtain health service and the children of the schools have been completely vaccinated against typhoid fever and diptheria.

Prizes of $2.50 were given to the best ranking babies of several divisions as follows:

Prize Winners negro clinic:

Section 1—6 to 12 Months

Leroy Mitchell, Minden, first prize.

Odis Harris, Minden, second prize.

Ruby Gipson, Heflin, third prize.

Section 2—12 to 36 Months

Velma Anderson, Minden, first prize.

Zula Mae Davis, Minden, second prize.

Sallie Mae Carr, Minden, third prize.

Section 3—36 to 48 Months

Henry Foster Carr, Minden, first prize.

Robert Holmes, Minden, second prize.

Verna Mae Moore, Minden, third prize.

Section 4—48 to 60 Months

Mable Ruth Whitt, Minden, first prize.

Dorothy Spiller, Minden, second prize.

Harold Dowell, Minden, third prize.

Section 5—60 Months

B. D. Smith, Jr., Minden, first prize.

Gloria Gratham, Normal Parham, Minden, second prize.

Ida Mae Kirksy, Sibley, third prize.

Examinations were conducted by the following colored physicians, Dr. J. L. Johnson of Minden, Dr. H. C. Tate of Shreveport, Dr. J. P. Lagston of Shreveport, Dr. R. T. Nelson of Shreveport, Dr. E. L. Dickson of Shreveport, and dentist Dr. Pierson of Minden.

It is the intention to soon hold a similar clinic in Spring Hill.

This Clipping From

SHREVEPORT

GREAT WORK DONE BY COLORED PINES

White People Vitally Interested in Anti-Tuberculosis Campaign Among Negroes.

"When we stop to think that most of the 25 negro patients at the Colored Pines, sanitorium for the treatment of tuberculosis, were a short time ago servants in the homes of white people, where they were handling food, preparing milk for babies and other ways coming in close personal contact with the families of their employers, then we begin to realize the seriousness of the problem of tuberculosis among negroes, and the necessity of accepting the solution of this problem as a civic responsibility," said Mrs. Robert Emery, field worker for the Pines, Tuesday.

Mrs. Emery has been associated with the Pines since its very beginning and her interest helped in the pioneer development of this institution. She entered upon her position as field worker only six months ago, but already her work is showing remarkable results. Mrs. Emery's work is confined principally to investigation of tuberculosis cases among negroes, and includes treatment and education to prevent the spread of the disease. Many negro patients have been induced to enter the Colored Pines through her efforts.

"The results we are geeting at the Colored Pines are wonderfully satisfactory, showing many arrested and greatly improved cases," Mrs. Emery said, in describing her work." And I am happy to say that because of the educational work which has been done among negroes who are suffering from tuberculosis, or who have been exposed to this disease, they are far more willing, even eager, to take advantage of the opportunities offered by the Colored Pines. When the building was first opened, they seemed afraid of it, and regarded it only as a place to go to die. But they are rapidly relinquishing this idea because of the many improved and arrested cases which are being turned out.

Has 25 Patients.

"We have 25 patients there now, and an increasing number is seeking admission weekly."

Mrs. Emery emphasized the importance of recognition of the problem of tuberculosis among the negroes, and the challenge which it offers to the white citizens of the community.

"The citizens of this community are vitally affected by the problem," Mrs. Emery said," because of the large percentage of negroes here, because they form the servant class, and because of the prevalence of tuberculosis among their race.

"The negro is peculiarly susceptible to 'consumption' or 'lung fever' as he calls it, and contracts the disease more readily than the white man. The intimate way in which large families of negroes live together in close quarters, with improper ventilation and poor food, are contributing causes to the spread of the disease among their race. The negro's ignorance and superstition lead him to bar his windows tight to 'keep out de nite air,' place a pan of water underneath his bed to 'knock out de nite sweats' and wear a ball of asafoetida around his neck to 'keep off de lung fever.'

"Records of workers among tuberculosis negroes show that from one case of tuberculosis in a negro family an average of from three to five cases in the present generation may be traced. Sometimes on examination of entire families three or four in the same household will be found to have the disease.

"These carriers of disease germs are going into the homes of white people to do their work, or are carrying the clothing of white people to their cabins to be laundered.

Malady Must Be Checked.

"Because of these facts, the importance of checking tuberculosis among the negroes can readily be seen. As a preventive recommendation, I would make two suggestions to persons employing negro servants. These apply especially to nurses caring for small children. First, have a competent physician to examine the servant once a year for tuberculosis. Second, investigate the sanitary conditions in the house where your clothes go to be washed.

"The dozens of cases which I have handled since I came to the Pines as a field worker have convinced me that if we are to stamp out tuberculosis in Louisiana, we must not overlook its most dangerous stronghold—the negro cabin."

The Colored Pines, where cases discovered by Mrs. Emery are usually treated, is located on the old Jefferson road, five miles from Shreveport, where it was built in 1926 at a cost of $50,000. It is the only institution of its kind in the United States which is non-sectarian and non-political.

Records of the sanitorium show that cost of care of patient is furnished free to 77 per cent of those at the Colored Pines from Caddo and Bossier parishes. The cost per patient per day at the Pines, where white patients are treated, is $3.50, and $2.44 per day at the Colored Pines. The number of patients treated at the Pines from Nov. 1, 1926, to Nov. 1, 1927, was 85. The number treated at the Colored Pines during this same period was 75.

The deficit of the two institutions due to free treatment of patients is taken care of by the Shreveport Federation of Community Work. Two-thirds of the amount derived from the sale of double-barred cross seals of the National Tuberculosis Association at Christmas time here also goes to the educational work of the Shreveport Tuberculosis association. The sale of these seals will begin this week.

Mrs. Robert Emery.

Health - 1927

Maryland.

COLORED DEATH RATE NEARLY DOUBLES WHITE

Statistics released by the Baltimore City Health Department for the month of December shows that the death rate per thousand colored inhabitants is 24.50 for an estimated population of 120,385 on December 15, 1926.

The total ppoulation on that date was 372,860. The death rate among whites was 13.32 per thousand. There were 308 colored babies born during that month and 1,137 white children.

The total deaths for the month were 1,032; 782 whites and 250 colored. The month previous there were 980 deaths for the entire population.

Pneumonia took the greatest toll during the month with 89, while chronic bright disease was second with 32.

BALTIMORE, MD.
Post
APR 1 1927

Plan Dental Exhibit For Colored Students

A dental exhibit emphasizing the importance of good teeth in preserving health will be held at Douglass High School next Tuesday, Wednesday and Thursday in connection with Negro Health Week.

Dr. C. A. Stewart of Washington will explain the exhibit. Dr. J. Ben Robinson, dean of the College of Dental Surgery of the University of Maryland, will speak next Thursday at 8 p. m.

Kelly Miller Says

Just now Howard University Medical School is in focus. The American Medical Association has fixed certain minimum requirements for a fully accredited medical school. It must have a productive endowment of at least half a million dollars.

With $250,000 conditional grant from the General Education Board, the university still needs about $100,000 by July 1st when the conditional grant will laspe. If the Negro could be brought to a full realization of what this bare pittance means the full amount would be forthcoming in a single day and no one would miss it.

A Plea For Racial Health

What profit is it to a race to gain the whole world and lose its health, or what will a race give in exchange for its health? If asked, what human value is of most worth, the inevitable answer would be health. Wealth, knowledge, culture and goodness are of inestimable value to a race or to an individual, health is basic of them all. For without health, the other values would be of little or no advantage.

The mad rush for racial attainment and achievement will only lead to vanity and vexation of spirit unless they be based upon a sound fabric of physical stamina.

The Negro race in the United States has not yet sustained the severest test of survival in the midst of a white environment. The last census showed lamentable decline in the rate of increase, which if conformed by later enumerations, spells the early or ultimate decline of the African contingent on this continent. Already gloomy statistical philosophers are predicting such a fate.

In an article published in the Scientific Monthly, several years ago, I undertook to show by analysis of the census reports that the apparent retrograde tendency of the Negro population was due to imperfections in the Census Office rather than to the degenerative tendency of the race. My position was strongly combatted by a sponsor of the Census Office, published in a subsequent issue of the same journal. The next census will confirm or refute my contention.

I shall be keenly on the alert, as soon as the 1930 figures are available. In the meantime, I confess, the slowing up of the birth rate gives me much concern. The shift towards the North and the cityward tendency trend in the same direction. The Negro's death rate is something like fifty percent higher than that of the whites. If the birth rate fails to keep pace, the proclaimed result is easily predictable.

Negro Physicians Only Safeguard

The health of the race can only be safe-guarded through the Negro physicians. We can no more rely upon white physicians to look after the health of the race than we can rely upon the white teacher for effective instruction of our children or upon the white ministry for intimate moral guidance. Personal sympathy and social touch are essential for the proper and effective dealing with human needs.

The Negro physicians, as a class, have fully vindicated the self-direction of the race in the most vital and essential function. The health of the race has been placed in their keeping, and they have more than met all reasonable expectation. We have here a body of professional men, equipped according to the scientific and professional requirement of the healing art, who measure up to the approved therapeutic standard.

The race, as yet has produced no other body of skill to cope with so vital and complicated an interest. No greater calamity could be predicted for the Negro than the failure to perpetuate this professional group and to reenforce its ranks so that it will be enabled to adequately cope with the health needs of the race.

Two Institutions, Meharry And Howard

There are only two institutions upon which we can rely for the perpetuation of the Negro medical profession—the Meharry Medical School at Nashville, Tennessee, and the Howard University School of Medicine at Washington, D. C. We can not depend upon white Medical schools in the North and West with any assured basis for such dependence. The doors are being closed by degrees upon the colored applicant.

Even now, it is difficult almost to the point of impossibility for a Negro student to receive full medical preparation from any white institution in the United States, including instruction, clinical facilities and interneship. He is first or finally thrown back upon these two Negro schools or Negro hospitals for part or all of his professional preparation.

If there is any responsibility that devolves upon the whole race which is more urgent than any other it is the support of these two medical establishments. Upon them rests the health needs of ten million human beings. The appeal is race wide. There is no ground for division of interest or diversity of opinion. Although these schools appeal powerfully to the whites, from the standpoint of the relativity of health and the vital welfare of the nation, yet to the Negro, the appeal is racial and immediate. If no white man contributed a single dollar, yet the Negro should support and sustain these schools on the highest standard of efficiency. Enlightened self interest demands this.

It is easier to focus on medical education than upon any other educational program confronting the race. This is an age of drives. Every worthwhile cause is now presenting its claims to public favor.

Pressing Demands Upon Pocket-books

Educational institutions, religious organizations and social agencies are pressing their demands upon the public pocket-book. As they are all worthy, we hardly know how to choose among them. But no one of them is essential to the needs of the whole race; for the reason that if any one should fail its competitors would easily fill the need. But in case of Medical training, there are but two institutions, neither of which is adequate, but both of which are necessary. It is not necessary to differentiate between the relative merits or rival claims. The race wide claims of the one are as compelling as those of the other. Each in its time and turn.

Howard University Medical School In Focus

But just now the Howard University School of Medicine is in focus. The American Medical Association has fixed certain minimum requirements for a fully accredited Medical School. It must have a productive endowment of at least half a million dollars.

The General Education Board several years ago offered a conditional grant of two hundred and fifty thousand dollars toward this endowment, provided the institution would duplicate the amount. The University still needs to raise about one hundred thousand dollars by July first, when the conditional grant will lapse. No right minded Negro can contemplate such a calamity without shuddering. The amount seems to be ridiculously small when measured against its importance to the whole race.

If the Negro could be brought to a realizing sense of what this bare pittance means to the health of the race, the full amount would be forthcoming in a single day, and no one would miss the contribution the day following the donation.

In the first place, the appeal is made to the whole race. Every one should feel it an opportunity to come to the rescue in this emergency. Any one who fails to respond, in however slight a sum, ought to feel that he is a sinner against the health of the race.

Appeal Made To 6,000 Alumni

In the second place, the appeal is made especially to the six thousand alumni and many more thousands of some time students who have shared the partial benefit of the University's instruction. If all of these should respond to the extent of ten dollars, the amount would be forthcoming. It is not thinkable that any graduate of Howard in any part of the country will allow this proposition to fail, or to succeed without having his name listed among the subscribers.

In the third place, the appeal applies particularly to the physicians of the country, regardless of what school they claim as alma mater. The integrity of the Negro medical profession demands that every Negro doctor should support Howard and Meharry. If the white race should cease to maintain them, and even if the Negro in general became apathetic, the physicians themselves, should keep them from failing, even if it became necessary to tithe their income.

Record Shows 2,500 Medical Graduates

In the fourth place, the appeal is made in especial and in particular to the Medical graduates of Howard University. The record shows that this institution has recruited the ranks of the profession to the extent of twenty-five hundred members.

If the Medical School should lose its rank as a class A college, the prestige of every one of these graduates would be discounted. They that have been benefited ought therefore to become enlarged. If these graduates could stop for a moment to consider the inestimable benefit which the University has been to them, they would not suffer their alma mater to cry unto them in vain, in the hour of her dire distress. If these graduates should give an average contribution of one hundred dollars, the requisite amount would be covered. This is about a bare bagatelle in comparison to the advantage the University has brought to them by way of added earning power.

I trust that every one under whose eyes this release may fall, whether alumnus or not, will feel impelled to send in his contribution as a racial obligation.

A PLEA FOR RACIAL HEALTH

By Kelly Miller, Sr.
Howard University

What profit is it to a race to gain the whole world and lose its health, or what will a race give in exchange for its health? If asked, what human values is of most worth, the inevitable answer would be health. Wealth, knowledge, culture and goodness are of inestimable value to a race or to an individual, but health is basic of them all. For without health, the other values would be of little or no advantage. The mad rush for racial attainment and achievement will only lead to vanity and vexation of spirit unless they be based upon a sound fabric of physical stamina.

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Annapolis Deaths Exceeded Births

Annapolis.—For the first time in months, deaths in the city exceeded births, the health report shows. Of the deaths 12 were white and eight colored. The births were four male and eight female whites and two male and one female colored.

TIMES
CUMBERLAND, MD.
SEP 22 1927

MANY FACTORS ENTER INTO HIGH NEGRO DEATH RATE

By DR. MORRIS FISHBEIN

Editor Journal of the American Medical Association and of Hygeia, the Health Magazine.

In a recent consideration of mortality rates in the United States a prominent physician analyzed the particularly high rate existing among the negroes.

In 1920 there were 10,463,131 negroes in the United States, constituting almost ten per cent. of the population. The death rates in general are decreasing, but for awhile were so much higher than those of the white race that the negro population is only one-half in proportion to the whites of what it was a century ago.

At birth a negro child has 14 years less expectancy of life than a white child; at 32 years, seven years less, and at 62 years, two years less. One of the reasons why negroes die faster than do whites is a lessened physical strength and resistance.

It must be remebered that they are a transplanted people living under conditions different from those under which the race grew. They have had, furthermore, less opportunity for education, less knowledge of sanitation and disease prevention.

Among the diseases which occur most frequently in the negro race are tuberculosis and diseases of the kidneys and lungs.

The murder rate is six times that of the whites. The diseases which seem to affect the negroes less than the whites are nervous disturbances, eye troubles and skin diseases. Their suicide rate is, moreover, about one-third that of the white race.

Because of their increased rate of mortality and their lessened life expectancy, they usually are forced to pay higher insurance rates than do white people.

Health - 1927

Mississippi.

NEGROES DIE TOO RAPIDLY

Jackson, Miss, Mar. 11 (ANP)—Figures compiled by the bureau of vital statistics show that the Negro birth rate is 23.80 per thousand again t 25.98 of the white population for the entire state. The death rate shows that mortality is much higher among the Negroes. The record of the past six years shows a Negro death rate of 14.01 per one thousand population compared with a rate of 9.01 for the whites.

Jackson, Miss., News

APR 3 1927

NEGRO DOCTOR WANTS STATISTICS OF RACE

Devotes Some Time to Bettering Conditions Among Negroes

Information in regard to the mortality rate among the colored people of the state is requested in a letter from Dr. F. E. Pinson, president of the Mississippi Medical and Surgical Association, of Vicksburg.

Dr. Pinson is one of the best known physicians in the state among the colored people, and has devoted considerable attention to the betterment of conditions among them.

His letter to Dr. Whitfield reads as follows:

"The Mississippi Medical and Surgical Association is trying to do their part to better the health conditions among our people. Our program is state-wide in scope and it is requiring quite a bit of effort to secure the proper information in regard to the mortality rate.

"May we have such information from the bureau that will give us the exact mortality rate among colored people of the state, or a comparative report of the cause?"

Dr. Whitfield's reply to this letter was as follows:

"We have your letter of March 31, in which you are asking for statistics on mortality in this state, especially for the colored people. I am glad to be able to furnish you information on this line, but I would like to know first whether or not you can wait three or four weeks so we may be able to give you the mortality statistics for the past year, which, of course, would be better than giving you the year 1925 at this time. We can give you a number of years but I am quite sure you would be glad to have the latest statistics in connection with the statistics for past years."

Health - 1927

Missouri.

Tuberculosis Survey Made by Infant Mortality Commission

Dr. W. J. Thompkins Reports Conditions Among Negroes.

Kansas City, Mo., June 14.—Dr. William J. Thompkins, physician, assistant commissioner of child hygiene and communicable diseases in the health department, has completed a survey covering five years of the ravages of tuberculosis among Negroes in Kansas City. Dr. Emmett W. Cavaness, health director, to whom it was delivered, said he regarded it as the most valuable information on file in his office.

Photographs of conditions as they are today accompany the report. These show where from one to five persons in a family are afflicted with the "white plague." Other members of those families, to support them, are now at work in private homes of the city, in stores and in factories. In each case the type of home is described, whether cottage duplex, tenement or hovel and ordinance are cited by number which if enforced, at least would lessen these conditions.

In Five Years, 2,086 Deaths.

Dr. Thompkins states in the last five years there were 2,086 deaths from tuberculosis in Kansas City of which 726 were Negroes, two-thirds of whom he asserts, could have been saved.

"One-third of this number," Dr. Thompkins contends, "died of criminal neglect, due to the lack of rigid enforcement of our sanitary laws and inability properly to isolate the patient from those not affected. Also many of the deaths were due to inability to perfect an unconditional quarantine; to the hazardous housing system and incomplete ventilation facilities as practiced and maintained by landlords.

"Second, because of lack of hospitalization, which is imperative; third, derelection on the part of physicians in reporting tuberculosis cases which condition permits them to roam at large and at will and assume the don't care attitude, and even deny they are victims of tuberculosis; fourth, a smuggling and misnaming of the disease on the part of the physician to enable the beneficiaries to collect life insurance.

Many With Money Not Reported.

"Few physicians report cases that have money. When persons are without money they go to available clinics of charity such as Wheatley Provident hospital for convenience of physicians. Invariably this is the first report of the case. They get prescriptions filled at the city hospital and that is the end. Then they go home and back to the clinic if they want to as compulsory attendance at clinics is not required.

"We at least can reason and argue that before conditions can be improved the Tuberculosis Society must extend its fields of activity and acquire new territory," the doctor continues. "For this achievement there must be one solution in obtaining the highest ideals of the organization. That is unconditional hospitalization, including all facilities for isolation and care of incipient cases of the mildest form to those of the last stage. It must either own or control the hospital itself, backed by police power, or it must have unconditional access to those institutions of the city. When this is accomplished a change would be noted within two years."

KANSAS CITY IS ALARMED BY "T.B." RATE

Segregation and Lack of Facilities To Care For Sick Held Chiefly Responsible For Condition

KANSAS,CITY, Mo., June 1.— Extremely critical conditions in the colored section resulting from the rapid spreading of Tuberculosis were revealed Monday in a report by Dr. E. W. Canvaness, director of health, and Dr. J. Thompkins, assistant commissioner of hygiene and communicable diseases. Blame for the state of affairs was placed directly on the segregation policies practiced in the city and the lack of adequate hospital facilities.

Disease Prevalent

Two-thirds of the 726 deaths from tuberculosis among Negroes in the last five years could have been prevented, Dr. Thompkins declared in his report. One-third of the toll of the white plague he said is due to "criminal neglect" in lack of sanitary laws regulate the patient,' to inability to isolate the patient from others, to inability to perfect an unconditional quartine. to the hazardous housing system, and to makeshift ventilation facilities provided by landlords in the Negro quarter.

Patients Not Confined.

Lack of hospitalization dereliction on the part of physicians in reporting tuberculosis cases, thus permitting victims to roam at large and spread the disease, and the misnaming of the disease on the part of the physician to enable the beneficiary to collect life insurance also are blamed for the high death rate

Hospital Beds Scarce

After pointing out that Kansas City affords only twenty beds for the hospitalization of Negroes for a total population of 45,000, Dr. Thompkins discussed flats, tenements and living quarters for the race.

"There are neighborhoods", he said, of blocks and blocks of houses all of which have had from one to ten cases of tuberculosis. There are scores of tenement houses in which have been scores of tuberculosis cases. These houses have not been remodeled, papered or painted in ten or fifteen years.

"There are families with one to four members suffering from tuberculosis, with a portion of the children in school and the other portion dying in filth from this disease. There are scores of homes where from four to seven persons live in a room. There are scores of women who are in domestic service with two or three children at home with tuberculosis.

Health Lecture at Ebenezer Sunday

The Allen Christian Endeavor senior league of Ebenezer is presenting Dr. J. E. Perry in stereoptican views and health talk at the assembly hall of parish house Sunday evening at 6:30. A musical program will proceed the lecture. The alumni association of Wheatley hospital, Douglass hospital and Old City hospital will be guests. Pubic invited.

A DEMAND FOR BETTER HOUSING

For several years attention has been directed to the bad housing conditions in Kansas City and to the direct relation between them and an unsatisfactory showing in public health. It is true these conditions are found only in limited parts of the city; but they are a matter of concern, or should be, to the whole community. Workers from the insanitary and disease breeding dwellings go into homes, into places of business and use the sidewalks and street cars in every part of the city.

One of the acute conditions in Kansas City is the high prevalence of tuberculosis among Negroes. The death rate of the race from this disease is more than four times that among the white people; and the rate has been mounting in Kansas City. The urgent demand for prompt dealing with this condition, not as a race, but as a community health problem, is shown in a recent study of the question by Dr. William J. Thompkins, Negro physician and worker in the city health department. This study shows on the one hand the bad housing conditions that permit the disease to flourish; on the other hand the need of hospital facilities and a responsible inspection of cases to allow segregation and adequate treatment of victims.

It is an intolerable situation that there are scores of houses, in a few instances solid blocks of them, in which there have been from one to ten tuberculosis cases in recent years. Many of these houses, it is shown, have not been painted or decorated in ten to fifteen years. Insanitary conditions of various kinds are in evidence about the dwellings. In many instances conditions are in direct violation of city ordinances designed for protection of the public health. Recently, there has been some correction of the conditions, but there needs to be much more. Their continuance will become an increasing menace to the city.

This condition, which has involved practically no hospital facilities for this type of cases, soon will be remedied in large part. This phase of the question ought to be adequately dealt with as plans are worked out for enlarging the city's hospital accommodations. But prevention is even more important than treatment and possible cure. Bad housing is at the root of much of the trouble. It ought to have attention wherever it is found.—Kansas City Star.

WHAT DO OBJECTORS CARE?

It is no play matter for some citizens to jeopardize the health of others as persons are doing who oppose locating the Negro city hospital on Michigan between 26th and 27th streets. This hospital, voted months ago, is needed now. Whatever the delay and whoever inspires it, human lives must pay.

The objections to the location chosen by City Manager McElroy would be funny if they were not tragic in their consequences. The objectors fear that the location will mean that Negroes will use Spring Valley

park. Surely they know that, with or without the hospital, Negroes are already free to use any and all Kansas City parks. They say if the hospital is built that near to 27th street, their "deadline", it will attract Negro population southward. They are either deliberately mendacious or woefully unobservant. Another hospital, The Christian, now the U. S. Veteran hospital, stands on the next hill, at 27th and Paseo. Though built ten years ago, every foot of ground near it, vacant then, is still unused. The truth is that home-seekers avoid hospitals, just like they avoid cemeteries.

Another argument is that if Negroes have their hospital located so far from their homes, they will have to use the street cars to visit their friends in the hospital. In other words, Negroes must not ride on Kansas City street cars. Will these brilliant spokesmen of the Linwood Improvement association, the East Side Improvement association and the Home Protective association, please tell us what we can do? They prohibit this and prohibit that, but never once offer even a suggestion as to what we can do.

In the face of their proven incapacity for community life, these are the people who have the boundless egotism which makes them think Negroes want to move near them, in a search for "social equality".

STAR
KANSAS, CITY, MO.

AUG 5 1927

NEGROES GIVEN CERTIFICATES.

Bills of Health Issued by Tuberculosis Society.

Health certificates are being given by the Kansas City Tuberculosis Society to all negroes in Kansas City who do not show symptoms of tuberculosis after an examination, Dr. C. L. Gilles, secretary of the society, said today.

Dr. W. J. Thompkins, assistant to Dr Ernest W. Cavaness, city health director, made a report recently of a survey of tuberculosis among negroes here, which was followed by a demand that examinations be made. A clinic now is open from 1 until 2 o'clock every Tuesday and Thursday at the Wheatley Provident hospital, 1826 Forest avenue.

KANSAS CITY, MO.

Post

JUN 6 1927

Vital Health Need.

Kansas City cannot afford to maintain an ostrich-like attitude toward the facts revealed in the tuberculosis survey among Negroes, recently made by Dr. W. J. Thompkins, assistant to the commissioner of child hygiene and communicable diseases. This is one situation in which the smug American attitude of "me and my wife, my son John and his wife, us four and no more" is not only inhumane but dangerous as well. No community can permit a cankerous sore to continue in its midst and not suffer from the spread of the corruption.

The alarming increase of tuberculosis in the Negro sections of the city during the last five years is a problem of the entire community inasmuch as the Negro has such wide and varied economic contacts outside the home. Moreover, tuberculosis is the most difficult of all communicable diseases to segregate or limit geographically.

No overnight panacea can solve the tuberculosis problem either among whites or Negroes. Persistent remedies and preventive measures are necessary. However, there are some immediate steps that the city can take in alleviating present conditions.

The first of these is a rigid enforcement of the sanitation laws, particularly in the Negro tenement districts. Dr. Thompkins says in his report:

"There is not a sanitary law in the medical code that has not been violated each day during these past five years."

Another urgent and fundamental step is the improvement of Negro housing conditions. Dr. Thompkins has compiled a list of Negro residences which are breeding places of tuberculosis and which should be overhauled and renovated, if not destroyed, in order to prevent further calamity. He reports that there are blocks of such houses, each of which shelters from one to ten cases of tuberculosis. In some such homes entire families are diseased.

These buildings have not been painted, papered or remodeled in from ten to fifteen years. In many instances families in good health moving into such places have become infected with tuberculosis. Many of these tenement buildings and shacks are owned by well-to-do citizens or financial organizations that by failing to remedy conditions have remained indifferent both to their civic and moral duty.

If the owners of such property cannot be awakened to their responsibilities, the city should have —and enforce—a housing code that will eliminate such dangerous plague spots.

KANSAS CITY, MO.

Post

JUL 27 1927

Survey of Negro Health Here May Be Chicago Model

The exhaustive survey of Negro health, housing and sanitary conditions in Kansas City, recently completed by Dr. William J. Tompkins of the department of public health, may be used by Chicago health officials as a model for a similar survey to be made there.

Dr. Ernest W. Cavaness, director of public health, today received a letter from Herman R. Bundensen, Chicago's commissioner of health, requesting a copy of Dr. Tompkin's report and also full details as to how the five-year survey was conducted here.

Mr. Bundensen said the report had been called to his attention through an article he had read in The Journal-Post and through a later report at a medical meeting, which described the Kansas City survey as the best of its kind ever made in the United States.

Health – 1927

New York.

A. P. Randolph and Mrs. MacDougald Discuss Health in Industry, Schools

Latter Holds That Primary Aim of Education Is to Promote Well-Being of All — "Health Dependent Upon Income," Editor Says

Health was considered from a variety of viewpoints at the annual meeting of the Harlem Committee of the New York Tuberculosis and Health Association last Tuesday evening at the Urban League building, 202 West 136th street. Among the speakers were A. Philip Randolph, editor of The Messenger and organizer of the Brotherhood of Sleeping Car Porters, who talked on "Health as an Asset in Industry," and Mrs. Elise MacDougald, assistant principal of P. S. 89, who spoke on "Health Education for the School Child."

"The primary aim of education is to promote the well-being of all," said Mrs. MacDougald. "And health is of utmost importance in attaining this. We lay a great stress on it in the public schools because a child cannot learn if he is not physically fit. If he needs glasses, he cannot see and therefore cannot learn. If he is undernourished, his mind is not alert. If he has diseased tonsils he may appear dull when really he is sick."

Mrs. MacDougald said P. S. 89 co-operated with the Harlem Committee in every way possible and that children frequently are sent from the school to the dental clinic and nutrition class.

"Happiness is, I believe, the chief end of life," said Mr. Randolph. "And health is the basis of happiness. We must feel physically and mentally fit to be happy. For that reason health is of vital importance to us all." Mr. Randolph added that health is partly dependent upon income and partly upon education. He said the Harlem Committee is engaged in spreading health education and that it should have the co-operation of the community in accomplishing its aim.

Dr. Alonzo De G. Smith led a discussion on health in schools in which he urged the co-operation of parents with school and medical authorities in keeping children well, by having them immunized against diptheria and vaccinated against smallpox and by observing quarantines.

Ira de A. Reid, industrial secretary of the New York Urban League, led further discussion of health in industry, saying that the problem is becoming a greater one as more people are going from domestic work into industry.

In giving the annual report of the activities of the Harlem Committee, Mrs. Mabel Doyle Keaton, executive secretary, said that 25,952 people were reached by lectures in schools and churches last year. The dental clinic served 1,075 children, giving a total of 3,549 treatments. Twelve dentists gave 735¾ hours of voluntary service to this clinic. Eight hundred and eighty-four people made calls on Information Service at the office, in addition to those who were given information over the telephone. Eight hundred and seventy-one field visits were made into homes. Other activities of the committee include the examination and weighing of children, an institute for physicians, the distribution of posters and literature in the community, health talks to workers in industry and a weekly nutrition class for children.

Miss Elsie Gordon, Reginald Bean, Augustus Bruell and George Mactootle of the Martin-Smith School of Music played several selection at the close of the business session.

LIFE'S SPAN IS ALMOST DOUBLED IN HUNDRED YEARS SAYS REPORT

Death Rate in New York Cut From 250 to 63 Among Infants Under One Year Old; Alarming Note of Warning Sounded As to Spread of Cancer in United States

NEW YORK, March 5.—(AP)—Two views, one optimistic and the other the adverse, were made public in separate statements today, casting light on American matters of life and death.

The average duration of life in New York City has been almost doubled since 1800 or within the existence of the college of physicians and surgeons of Columbia university, said one announcement.

The other said the deaths from cancer in the United States as a whole have advanced from 63 per 100,000 of population in 1900 to 91.9 in 1924.

"Yellow fever, malaria, typhus, cholera, smallpox, kill more in our city," Dr. Haven Emerson, professor of public health administration at Columbia, said: "Typhoid and diphtheria will follow."

"The life span of the average New Yorker which was over 30 years before 1800, extends to an average of more than 60 years at present. The infants dying in their first year of life now number 63 in the thousand instead of 250, and tuberculosis kills its 93 instead of 400 in every hundred thousand of our population each year."

Dr. George A. Soper, managing director of cancer, speaking at the society's annual meeting today said:

"Although it has never been the society's policy to frighten the people about cancer, it is necessary to face the fact that the disease is increasing. It has advanced from sixth to fourth place among leading causes of death in the continental United States, being preceded only by heart disease, pneumonia and cerebral hemorrhage and softening of the brain.

"The total number of cancer deaths reported for the year was roundly 103,000 and more than 300,000 are suffering from the disease at the present time.

"Leadership in the field of cancer prevention and cure is needed as never before because public interest in cancer increased so rapidly during the past few years to encourage a horde of quacks and quak institutions. There are more quacks today than ever and they are more dangerous. The time is about past when cancer cures are sold over the drugstore counter, or from the ail of a cart on Saturday night in the village square or through paid newspaper advertisements. The modern quak is an entirely enterprising business man."

CAMPAIGN TO AID NEGROES.

Committee Opens Drive for $25,000 at Fannie Hurst's Home.

Plans for a campaign to obtain an endowment of $25,000 for the work of the National Health Circle for Colored People, Inc., were made at a meeting of the committee yesterday afternoon at the home of Fannie Hurst, 27 West Sixty-seventh Street. Besides Miss Hurst those on the committe include George Gordon Battle, the Rev. S. Parkes Cadman, Ralph Jonas, Alfred A. Knopf, Adolph Lewisohn, Mrs. Medill McCormick, James H. Post, Theodore Roosevelt, Nathan Straus J., Lillian D. Wald.

In a letter setting forth the aims of the organization Miss Hurst wrote:

"There is much talk about a negro renaissance in America. Which is rather beside the point, because what has not yet been born cannot very well be reborn.

"What actually is happening, however, is that artistically and intellectually a languid-minded race is beginning to assert its manifold talents. The negro is by way of becoming an economic, industrial and intellectual force in national life. He is showing spottily, in those sections of the country where he has had the chance to develop, witness Chicago and New York, qualities heretofore unsuspected."

HARLEM HEALTH IS HELPED BY WORK OF CITY ASSOCIATION

N. Y. Tuberculosis & Health Ass'n. Harlem Committee Holds Annual Meeting

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MAY FIRST TO BE CHILD HEALTH DAY

Child Health Day is Sunday, May 1. It will be observed by the North Harlem Community Council, through the committee on health and sanitation. Special speakers will appear at the various Harlem churches.

The chairman of the committee is Dr. Anna Cooper, who is giving a free course in the care and training of infants and children—in health and illness—at Public School No. 136, every Thursday and Friday evening.

A Lecture on Health

By Ernest E. Mair

We are assembled here tonight to talk
about our health
And health, the savants say, is more
important by far than wealth;
But everybody's serious so I reserve
the right
To make my comment comical and
treat the matter light.

My rules for keeping strong and fit
are sure to interest
I look upon all health crusades as un-
diluted pests,
Go strut your stuff all over town and
go to bed at dawn.
Spend every cent you have and then
put all your goods in pawn.

Eat all the lobster thermidor, drink all
the wine you get,
Astonish everybody by the rapid pace
you set;
Be sure to smoke an awful lot, and
every night get drunk
This talk about intemperance is all a
lot of bunk.

Indulge yourself without restraint in
every game of chance,
Test out your heart competing in a
long-endurance dance;
Don't spare yourself in chasing fun,
don't let your blood get cool
And you'll be dead inside a month,
you poor deluded fool.

N. Y. WORLD

APR 3 1927

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Decrease in Last Six Years Is Shown by Figures of the Department of Health

By Lester A. Walton

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In 1920, the deaths to 1,000 births were 163.9, while for 1926, the rate was 122.3. 1926 was known as an "epidemic" year, it has been pointed out.

Due to improved living conditions, the death rate among local Negroes from communicable diseases has appreciably decreased. There has been a reduction of 130 points in pneumonia from 1920 to 1925, inclusive, and a reduction of 150 points in tuberculosis during that period.

Officials Gratified

While both the infant mortality and general death rate are still regarded much too high, health officials and others express themselves gratified over latest vital statistics.

Arguments used to be advanced that the Negro was susceptible to communicable diseases because of inherent weakness. But to-day leading authorities assert economics has a direct and important bearing on the individual's health, irrespective of race or color.

Room overcrowding has a disastrous effect on public health. On this subject Dr. Haven Emerson, professor of public health at Columbia University, says:

"With the increase in room overcrowding there has been an increase in infant mortality, in tuberculosis and in the general death rate. All experience in this country and abroad shows that reduction in room crowding has resulted in reducing one disease group which hitherto we have not been able to control, and that is the disease of the respiratory tract, notably pneumonia, bronchitis, influenza and tuberculosis.

Dr. Louis I. Harris, New York City's Commissioner of Health, observes that "in the light of experience it has been found that morbidity and mortality from tuberculosis and the acute communicable diseases in particular have a direct relation to housing conditions.

"In considering the influence of housing upon sickness and death in a community, it may be argued that the economic conditions and the habits of the people play a preponderating role; that the various factors of housing economics and social conditions interlock and that it is difficult to say to what degree each individual factor may operate.

"A very interesting reflection of the role which housing plays is to be derived from this fact, that out of every 100 admissions to contagious disease hospitals of the City of New York those that come from overcrowded rooms may be listed as follows:

Boroughs	Percentage Coming From Overcrowded Rooms
Manhattan	71
Brooklyn and Bronx	67
Queens	47
Richmond—Not determined, but probably at least as low percentage as Queens.	

"I make bold to say that if the housing conditions in the city as a whole were improved so that room congestion would be very materially reduced, or eliminated, the prevalence of tuberculosis and the mortality from this disease would take a very sudden and decided slump.

Nests of Disease

"Poor housing sections are the nests and breeding places of disease that are not confined to the poor, but spread through all the channels of communication and contact that exist in a big city. The well-to-do and the rich, though they may not recognize it, enjoy the protection from communicable diseases and epidemics, in particular, only in proportion as the poor are well housed and protected."

James H. Hubert, Executive Secretary of the New York Urban League, thinks it is a wonder that the death rate among Negroes has not risen higher in view of the economic handicaps the race encounters. He says:

"In my opinion the most fundamental is the Negro's inability to secure an adequate, living wage. In a study of some 4,000 wage earners made by the New York Urban League, we found that the average weekly earnings for heads of families was $19.75, the average rental for an apartment, $41.14 a month; 52.2 per cent. of the monthly income of the heads of these families was expended for rent.

"In order to maintain themselves they resort to taking in lodgers, and mothers and children go out to work. The wonder is that under these conditions the death rate has not risen higher. Excessive rents and inadequate wages also are affecting the birth rate. Poverty on the one hand and a desire for economic independence on the part of the well-to-do result in the exercise of birth control and a limitation of the offspring."

$100 in Prizes

Announcement is made by the Commission on Interracial Co-operation, Atlanta, Ga., that $100 in prizes will be awarded high school students submitting the three best papers on "Negro Progress Since the Civil War." The contest will be open to any high school boy or girl in the United States, and the awards will be $50, $30 and $20, respectively.

The commission has sent a letter to every high school Principal, also to every Y. M. C. A. and Y. W. C. A. in the South, asking that students be interested in the contest. The letter reads, in part:

"People's lifelong attitudes are usually formed during the years of youth. Certainly it is very difficult to get grown folks to revise their preconceived notions. And the more mistaken those notions are the harder they are to change. Most of our racial antagonisms, for example, are picked up in the formative days when the different groups throw stones at each other on the way to school.

"Hence, in order to bring people into right attitudes toward each other, particularly toward those radically different from themselves, it is necessary to begin early. Not the least important part of the educational process is just this training of people to 'get along.' We want to give our high school boys and girls a basis for more intelligent and kindlier attitudes between the two races here in the South who, so far as we can see, are destined to live side by side for a long time to come."

Following are figures on Negro progress, since the Civil War:

	1866	1926
ECONOMIC		
Homes owned	12,000	700,000
Farms owned	2	218,612
Farms operated	20,000	1,000,000
Businesses conducted	2,100	70,000
Wealth	$20,000,000	$2,000,000,000
EDUCATIONAL		
Per cent. literate	10	80
Colleges and Normal Schools	15	500
Students, Public Schools	100,000	2,150,000
Teachers, all Schools	600	41,000
Property for Higher Education	$60,000	$30,000,000
Annual Expenditures	$700,000	$28,000,000
RELIGIOUS		
Number of Churches	700	45,000
Church members	600,000	5,000,000
Sunday Schools	1,000	40,000
Sunday School Pupils	50,000	3,000,000
Church property	$1,500,000	$30,000,000

Health Education Among Negroes in New York City

NEW YORK CITY is having a steady flow of Negroes from the South. In the decade between 1910-1920 the increase of Negroes in New York City was 64,753. In the last seven years the increase must be near 60,000. At the present time they number over 200,000. This is a large population of Negroes suddenly compelled to adjust itself to a new and difficult environment, habits, occupation and diet.

These factors influence largely the health of all people and especially Negroes, whose immunity is not developed against overcrowding, respiratory diseases, heart ailments and kidney diseases.

The task of educating 200,000 Negroes undergoing a period of adjustment in personal and public health matters is a stupendous job, and it is going to require the combined efforts of the Negro medical men as teachers, the educated and influential laymen as promoters, and the Negro press as the mouthpiece of publicity. Our immediate efforts must be to increase the expectancy of life among our city Negroes twenty years longer than it is at present. This lengthening in life expectancy will mean much to our economic salvation.

The Negro's economic status is low at the present time. Increased sickness will lower it still more through discomfort, anxiety, inconvenience and premature death.

The Negro's attitude relative to health details must be changed. We need more concerted action and study in the biologic and social reactions of the Negroes in their new problems of city life. At the present time, only four or five organizations are actively engaged in health education among Negroes in New York City, bringing a measure of hope, encouragement and enlightenment to the masses who need it so much.

The industrial, social and health work of the Urban League is undoubtedly helpful. The Harlem Tuberculosis Committee and Health Information Service are pushing their program to the needy Negroes. The Henry Street Settlement, with its Harlem branch, is doing efficient detail work in the homes of the poor. The North Harlem Medical Society is enlarging its work and program in community health problems. The Social Service Department of Harlem Hospital is doing some work that is good, but its activities are small and its organization is meager. This department of such an important hospital among Negroes should be big enough to cope with the cases needing home and environmental investigation and help. The influential Negroes and politicians should demand a larger and more efficient Social Service Department to Harlem Hospital.

These five organizations are teaching and helping the masses. They are, however, only a drop in the bucket. Social maladjustment, ignorance and overcrowding are the chief causes of sickness among New York Negroes.

Much of this sickness, such as tuberculosis, pneumonia, heart disease, infant diseases and syphilitic nervous diseases, can be lessened in intensity, and in many cases prevented, by education, sanitation and early medical care. The community, to bring results, must be wide awake.

The educated Negroes, those of wealth and power, must pitch in and give their time, money and thought to this problem of community interests.

In this way the burden of help will be equalized by all; the rich and the powerful doing their part, but not having thrust upon them all the burdens of the unfortunate, the poor, the uneducated and the lowly. In other words, the many Negroes who can must help in the matter of community co-operation.

HARLEM FIRE HAZARDS HIGH

'Clean-Up Campaign' Report Shows Conditions Bad in Negro District.

The report of the Clean-up Campaign, conducted from April 18 to 23, was presented yesterday by the Committee on Surveys of the New York Board of Fire Underwriters at the room of John Street.

Fire hazards were found in all parts of the Harlem district, and of 4,789 buildings visited by the inspectors, 1,986 were found in bad condition. In the downtown district, where a large number of small manufacturing plants are located, the number of places in bad condition was approximately one in fourteen.

Conditions were particularly bad in the negro district from 125th to 155th Streets, St. Nicholas Avenue to the Harlem River, while in all that part of Manhattan from Canal Street to Thirty-fourth Street conditions were very good.

For Negro Health

THE first national campaign for funds for Negro health by the National Health Circle for Colored People, Inc., 370 Seventh Avenue, New York, started off with two interesting letters by Fannie Hurst, the novelist, who is campaign chairman. The object of the Circle is to organize public opinion and support for health work among Negroes, to organize local health circles among colored people, to establish scholarship loan funds for the training of colored nurses and teachers, and to maintain nurses for certain periods at strategic points. Belle Davis is executive secretary and the executive committee includes Dr. Louis T. Wright, Dr. Haven Emerson, and Lillian D. Wald.

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And health, the savants say, is more
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But everybody's serious so I reserve
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To make my comment comical and
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My rules for keeping strong and fit
are sure to interest
I look upon all health crusades as un-
diluted pests,
Go strut your stuff all over town and
go to bed at dawn,
Spend every cent you have and then
put all your goods in pawn.

Eat all the lobster thermidor, drink all
the wine you get,
Astonish everybody by the rapid pace
you set;
Be sure to smoke an awful lot, and
every night get drunk
This talk about intemperance is all a
lot of bunk.

Indulge yourself without restraint in
every game of chance,
Test out your heart competing in a
long-endurance dance;
Don't spare yourself in chasing fun,
don't let your blood get cool
And you'll be dead inside a month,
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In this way the burden of help will be equalized by all; the rich and the powerful doing their part, but not having thrust upon them all the burdens of the unfortunate, the poor, the uneducated and the lowly. In other words, the many Negroes who can must help in the matter of community co-operation.

For Negro Health

THE first national campaign for funds for Negro health by the National Health Circle for Colored People, Inc., 370 Seventh Avenue, New York, started off with two interesting letters by Fannie Hurst, the novelist, who is campaign chairman. The object of the Circle is to organize public opinion and support for health work among Negroes, to organize local health circles among colored people, to establish scholarship loan funds for the training of colored nurses and teachers, and to maintain nurses for certain periods at strategic points. Belle Davis is executive secretary and the executive committee

HARLEM FIRE HAZARDS HIGH

Board of Fire Underwriters at the [illegible] board room, 85 John Street, [illegible]

'Clean-Up Campaign' Report Shows Conditions Bad in Negro District.

The report on the Clean-up Campaign, conducted from April 18 to 23, Harlem River, while in all that part of Manhattan from Canal Street to Thirty-fourth Street conditions were very good.

Fire hazards were found in all parts of the Harlem district, and of 4,789 buildings visited by the inspectors, 1,986 were found in bad condition. In the downtown district, where a large number of small manufacturing plants are located, the bad condition was approximately one in fourteen.

includes Dr. Louis T. Wright, Dr. Haven Emerson, and Lillian D. Wald.

Health-1927

NEW YORK.

A PLEA FOR RACIAL HEALTH

By KELLY MILLER-

'Photographic Requirement a Stumbling Block'

THE New York Times of Sunday, May 15, contained an interesting editorial on "Fifty Years of the Merit System." The article records the dark struggle of the civic reformers, through whose patriotic efforts the proposition was enacted into law. Up to that time the public service was recruited through a patronage system, whereby each Senator and Congressman was allotted so many places in departmental service. These places were, of course, filled by partisans and henchmen of the benefited politicians, with little or no heed of merit or fitness of the applicant for the position sought.

Such high-minded and patriotic citizens as George William Curtis, Norman Bridgman and Carl Schurz regarded this patronage saturnalia as undermining the very foundation of the government. They advocated civic service reform as vital to the perpetuation of free institutions. One would have to project himself backward for more than a generation to gain the full significance and import of this vital reform. We are so accustomed to the process that we are disposed to think that it has always been in operation. It is the fate of the reformer. As soon as the reform succeeds, the reformer is forgotten.

The Times calls attention to the progress of the movement and at the same time to the urgent need to keep up vigilance lest the old patronage evil reassert its evil self again.

As a student of social subjects, I find that it is necessary to traverse every discussion of public interest twice—once to ascertain its general aspect, and then to point out its special application to racial situation and circumstances. When the civil service law first went into operation there was absolutely no discrimination on account of race or color. Colored men and women were recruited in the classified service, as result of competitive examinations. Theodore Roosevelt, then Civil Service Commissioner, vehemently insisted that all should have a square deal, and that merit and merit only should count. Grover Cleveland was then President, and upheld the hand of the strenuous commissioner in his attitude towards righteousness in public service.

DEAN KELLY MILLER.

Somewhat later photographic identification was required for each applicant to prevent fraudulent impersonation, as frequently happened. This seemingly harmless and helpful innovation has served the vicious purpose of effectively shutting out the colored race from entering the classified service. Under the law, the Civil Service Commission, when called upon, must certify to the appointing officers of the several departments of the government three of the highest names on the list. With the photograph in hand these appointing officers always reject the applicant whose face shows pigmentation, regardless of his rank on the list. Cases have been known where a candidate with concealable pigmentation has been cited for appointment and then turned down when on reporting closer inspection revealed the trace of color which the photograph did not disclose.

Although in the earlier years hundreds of the race qualified under the competitive test and received appointments in the classified service, yet today, after our schools and colleges have greatly improved in facilities and methods of instruction, scarcely any of the off-colored group are able to secure positions of clerical grade.

The ranks of the colored clerk are gradually fading. Thousands have been reduced to hundreds; and hundreds will soon be reduced to tens, and tens to zero. A lake with outlet without inlet must soon run dry. A knowing friend who keeps in touch with inside information advised me the other day that there are now less than three hundred colored clerks in the departments at Washington.

President Coolidge has given definite assurance to more than one Negro delegation that he was going to effectually wipe out racial segregation in the public service. So far we have not been able to discern any direct evidence of his declared purpose. He has been in office for fifty-five months and has twenty-two months yet to serve. It would be an interesting and engaging task to discover how many colored clerks have been withdrawn from the service through resignation, death and retirement during the present incumbency, and how many fresh recruits have been added to take the place of those who have fallen out.

One wonders if Mr. Coolidge has in mind to get rid of segregation by getting rid of the segregated group. If he is renominated and elected, and if the colored clerical contingency continues to decline as rapidly during the next four years as it has during the last quadrennium, there will be no further need of delegations besieging the White House on the issue of departmental segregation.

For the past four years I have been hammering away, as best I could, on the iniquitous injustice of the civil service machinery. I have urged the politicians and statesmen of the race to focus their efforts on this evil. I have urged the Civil Service Reform League, the Civil Service Commission and the President of the United States to wipe out this moral stigma from the machinery of our national government. No whit abashed, I shall continue to hammer until something gives way. The Civil Service offers a respectable outlet for hundreds of our educated youth, a privilege out of which they are being cheated by the government itself. The race has become intimidated.

I suggested to the Civil Service Commission the substitution of the Binet test for photographic identification. The commission rejoined that the process would be too cumbersome to operate. How long will our high-minded government allow the mere incidents of administration to stand in the way of justice and fairness to its citizens?

I here and now suggest to our men of public influence to urge upon Congress to amend the law in such manner that no citizen who sustains the competitive test shall be cheated out of his reward. I shall proceed to draft an amendment to the Civil Service Law, and hope to get some of my friends in both houses of Congress to introduce and push it to successful enactment. I beg, however, that our politicians — use the term with respect — utilize their inside influence, and take the matter out of my hands. The laying of the egg is of more importance than the hatching thereof.

It is interesting to note that our two largest cities have placed colored men on their civil service board. Both New York and Chicago have made such assignments. In the latter case, we are told that the mayor made the assignment with purpose aforethought. The colored race, we are informed, has been flagrantly discriminated against by the city civil service machinery. Mayor Thompson wishes all of this stopped, and places a colored man on the staff to see to it that justice is done his race.

Why is this not a reasonable and seasonable suggestion to the national government? The injustice to the Negro in the civil service is too painfully obvious. It is hard to see how Mr. Coolidge can reconcile this with his New England conscience. Would it not be a capital idea to place a colored man on the commission, whose very presence would insure racial justice?

Some time ago, when there was a vacancy on the commission which must be filled by a woman, under the law, I suggested the name of Mary Church Terrell, who is as well qualified for the position as any woman in America, white or black. The proposition was made in one of my releases. But I suppose my lack of political sagacity caused the suggestion to fall short of merited attention. So far as I can recall, no influential Negro paper or politician seconded the motion.

The race is a slave to precedent. There are a dozen candidates for the position of Recorder of Deeds of the District of Columbia and Register of the Treasury under each incoming administration. The only reason that can be put forward why the race concentrates on those positions is because some colored man has had them in the past. They have absolutely no racial function or relation. The Register of the Treasury has no more

relation to the welfare of the Negro race as such than the Astronomer at the Naval Observatory. But here is a position that is closely related to racial interest and advantage.

Why should the race not unite on securing this position which carries with it the possibility of large racial usefulness? The Negro makes a great many demands of the party of his preference before election and of the administration immediately after election. Usually the guileful candidate knows how to jolly the brother in politics until his vote is secured and to soft soap him after the victory has been won. I seem to have some faint recollection of one Mr. Matthews and his fourteen points. But they amounted to less than the scrap of paper upon which they were written.

If the race will now, in advance of nomination and election, insist with unified and persistent insistence upon the righteous amendment of the Civil Service Act which will insure simple justice to colored applicants and upon the selection of a colored man for a place on the Civil Service Commission, there is no good reason why we might not secure one or both of these patriotic objectives.

HARLEM IS MASTERING HEALTH AIM

Sickness In Harlem Has Decreased Materially Since Beginning Of Better Health Campaign

NEW YORK, July 20—Harlem, once notable for its picturesque push-carts, is today better known as the community to undertake a pioneer health program.

For almost six years the East Harlem Health Centre, situated on the north side of 116th Street near First Avenue, and operated by the Health Department of the City, with much of its support contributed by the private agencies of the neighborhood, has been building up a plan for carrying health into the homes of the eighty-seven city blocks embracing the district. As a result the dividends paid in lives saved in Harlem are indisputable.

Harlem Improving

During the last five years Manhattan's general death rate has increased, while Harlem's has shown a material reduction. Expressed in percentages the rate for Manhattan in 1925 was 4.9 per cent greater than in 1920, while that of East Harlem was 20 per cent. lower, according to a report prepared under the direction of Kenneth D. Widdemer, the Executive Director of the Centre.

In 1920 East Harlem's general death rate was 14.68 per 1,000 population, compared with 14.45 for Manhattan. In 1925 it was 11.66 per 1,000, compared with 15.20 for Manhattan. The number of people dying annually had decreased from 1,733, the annual average for 1916-20, to 1,132. The number of deaths from pneumonia dropped from 376 in the period 1916-20 to 166 in 1925; and deaths from pulmonary tuberculosis decreased from 158 to 78.

One of the most notable gains was made in the case of infant mortality. In two sections where intensive work was undertaken, the rate was 23 per cent. lower in the period of 1923-25 than in 1920-22, and it was 17 per cent. lower in the remainder of the district as compared with a reduction of 13 per cent. in Manhattan. From 412 deaths of East Harlem children under one year of age annually in 1916-20, the number dropped to 194 in 1925.

Child Health Improved

All of the children's diseases decreased. Diarrhea and enteritis which during 1916-20 caused an average of 116 deaths annually, caused 43 in 1925; deaths from diphtheria and croup dropped from 36 in 1916-20 to 13 in 1925; deaths from

Medical Society Starts Health Campaign

The North Harlem Medical Society, the membership of which consists of 90 per cent of the practitioners in Harlem, commenced its 1927-28 sessions Thursday night last with a round table discussion, during which some very important features in connection with health matters were discussed.

Dr. Wiley M. Wilson presided. The reports of the last year's work were read by Dr. Ellis, secretary, and Dr. Ezra Reid, the financial secretary.

The discussion was led by Dr. E. Elliott Rawlins, followed by Drs. Petioni, Wright, Granaday, McGhee, Brown, Ross, Armstrong, Whiteman, Murray, Alexander and others.

The situation at the Harlem Hospital, including the outdoor and indoor services, in their relation to both the physicians and the patients was seriously considered.

It was suggested that for the ensuing year an extensive health campaign be instituted in conjunction with the Cancer Institute, the Tuberculosis Association and the Health and State Medical Departments.

Among the other members present were: Drs. Allen, Amos, Ayer, Best, Cheney, Dismond, Greaves, Howard, Ferguson, James, J. J. Jones, J. H. N. Jones, Omar Price, Riley, Young, etc.

Health - 1927

North Carolina.

Journal

WILMINGTON

DELAWARE

FEB 11 1927

COLORED PUPILS IN HEALTH CRUSADE

Students of colored public schools throughout the State are entering into the modern health crusade with the greatest enthusiasm. One of the latest to be enrolled is that of the Laurel school in Sussex with 108 children. The school has a glee club and a dramatic club and Miss Beanjeau who is in charge of the dramatics, is planning to produce a little health play, "Little Boy Blue Wakes Up."

Among the pupils enrolled in the Laurel school are 38 children in the first grade. Lillian McKinnon, teacher; 42 children in the fourth, fifth, seven and eighth grades, Eunice Little, teacher, and 28 children in the third and sixth grades, Miss Starkey, instructor.

Miss Nell Marvel in charge of the work in Sussex County with Miss Erma V. Seeds, of the Wilmington Headquarters of the Delaware Anti-Tuberculosis Society, were in New York the past feew days conferring with officials of the National Tuberculosis Society concerning the work in Delaware.

New schools recently awarded buttons for completing courses by Miss Seeds embraced Rose Valley, Bertie O. Wood, teacher, 13 Knight buttons; Hanby School, Lyda P. Hanby, teacher, five Knight and one Squire buttons; Clayton Colored School, Constancia Beaujeau, teacher, 41 Squire buttons.

Durham, N. C. Herald

MAR 17 1927

COLORED PEOPLE HOLD MASS MEETING TONIGHT

Clean-Up Plans Will Be Outlined At Meeting

A mass meeting for colored citizens will be held in the Mount Vernon Baptist church this evening at 8 o'clock under the auspices of the Negro Business league, it was announced last evening. The meeting has been arranged for the purpose of outlining plans for the colored people to co-operate with the Durham Chamber of Commerce in the clean up drive to be staged next month.

George W. Cox, president of the business league, will be the principal speaker at this evening's meeting. It was stated last evening that the colored people were planning to join whole heartedly in the clean up and paint up drive and that tonight's meeting was merely to outline details of the work.

TRIBUNE

Concord - N C

SEP 10 1927

COLORED PEOPLE HAVE COMMUNITY FAIR OCTOBER 7

Negroes of Rock Hill School Community Plan For the Sixth Annual Fair Early Next Month.

Plans for the sixth annual community fair of colored people in the Rock Hill school section are rapidly going forward. The one-day Autumn festival will be held Friday, October 7th, on the Rock Hill school campus and will be featured by a variety of amusement.

Following a parade of the colored fair patrons, led by a brass band, from the Cabarrus District Fair grounds to Rock Hill school at noon time, a number of white persons will deliver timely addresses. Among those on the program are Miss Ophelia Barker, county home demonstration agent; R. D. Goodman, county farm agent; Prof. I. D. L. Torrence, farm agent of Mecklenberg, and others.

During the morning the visitors after viewing the exhibits, will find amusement in sack races, potato races horseshoe tournament, and various other games. In the afternoon at 4 o'clock a red-hot baseball game is scheduled between the Landis Red Socks and the Rock Hill Giants.

All exhibits must be entered in the afternoon before the fair, except the livestock and poultry, which must be on the grounds by 9:30 a. m. Friday. The school building will be open for entries until 11 o'clock Thursday night. A hundred or more dollars will be paid out in premiums.

The officials of the community fair association re: J. T. Mobley, president; D. M. Bost, vice president; Alice Weaks, secretary; and J. H. Harris, treasurer.

Goldsboro, N. C., Argus

AUG 20 1927

Free Health Clinic For Negro Race

Through the Health Committee and the Committee on Child Welfare of the Council of Negro Organizations, free health clinics will be held next week in the colored schools of the city for the examination of all children who will be registered in the schools this fall. It was brought to the attention of the council at its regular monthly meeting that during the last school year 50 per cent of the absences were due to illness. The members of the council believe that by holding these clinics before the opening of school and acquainting parents with the physical condition of their children, a real community need will be served.

The clinics will be held as follows:

Monday, August 22—10 A. M. to 12 M at the Dillard High School.

Wednesday, August 24—10 A. M. to 12 M at the North End School.

Friday, August 26—10 A. M. to 12 M at the East End School.

The colored physicians, dentists and nurses of the city are giving their services and parents are urged to send their children the day the clinic is held in their section of the city. Especially should children who are to enter school for the first time this fall be examined. Dr. E. T. Gordon is president of the council, Dr. W. H. Bryant is chairman of the Health committee and M. L. Mitchell, chairman of the Child Welfare Committee. The council meets regularly the first Monday in each month at the Dillard High School promptly at 8 P. M. and every organized negro body in the county is invited to become a member and send a representative to the meetings.

WINSTON SALEM, N. C. Journal

1927

Local Negro Schools Will Have Health Demonstration

City's Health Department and City School System Gain Recognition

3-Year Plan

Great Experiment to Be Conducted

Through the action of the American Child Health Association, headed by Herbert Hoover, in choosing Winston-Salem Teachers College and the Columbia Heights public schools for conducting a three-year health education demonstration, Winston-Salem's health department and educational system again have received national recognition, it was announced yesterday.

Never before has a demonstration of this type been conducted in any place, it is declared. Its inception here is believed to be an advanced step in a most important educational field.

Purpose of Demonstration

The purposes of the demonstration are: (1) To teach the fundamental health rules, to develop the right attitude toward health and to build health habits. (2) To put into action and check a well-rounded health program that considers the health applications of each course taught. (3) To demonstrate how to organize, how to operate, what to stress, what groups should participate, how to check and what should be the outcome of a health education program. (4) To train teachers to appreciate their responsibility in the health program, to see the program as a whole and to participate in the program where ever possible.

The American Child Health Association has served on an advisory committee for the past four years to the National Negro Health Week Committee. This year as a matter of interest and co-operation in helping to develop a practical program of work, The American Child Health Association decided to choose a representative negro teacher training institution in the South and direct a health education program in the institution, provided the approval and co-operation of this State and local authorities could be secured.

Given Approval

Dr. C. H. Laughinghouse, State Health Officer, Dr. A. T. Allen, State Superintendent of Public Instruction, N. C. Newbold, State Director of Negro Education, and Mrs. Kate Burr Johnson, State Commisisoner of Public Welfare have given their hearty approval of this project. Dr. R. L. Carlton City Health Officer, and Mr. R. H. Latham, City Superintendent of Schools are actively co-operating in the undertaking. Dr. S. G. Atkins, president of Winston-Salem Teachers College is putting forth every effort with the faculty and student body to help in the development of the project. The demonstration will be directed and supervised by Margaret M. Edwards, representative of the American Child Health Association, and formerly with the State Department of Education in North Carolina.

The first big stroke of the project has been initiated. Dr. R. L. Carlton, City Health Officer has enlisted the services of a representative group of negro doctors in the city. These doctors have volunteered their services to give health examinations to the students enrolled in the Teacher Training Institution. On Monday of this week, seven doctors started the examinations, which are being given each day of this week from 10:00 to 12:00 in the Columbia Heights elementary school building under the direction of Dr. R. L. Carlton and Dr. Lindsley Cook of the City Health Department. The doctors who are giving their services include: Drs. J. W. Jones, W. H. Bruce, H. H. Hall, H. W. Hall, J R. Henry, A. H. Ray and I. A. Fountain.

To Make Corrections

The plan is to have examinations given to each student on the opening of school and to have all defects treated and all possible corrections made during the year. These defects will be carefully checked twice a year by school authorities.

The Public Health nurses of the City Health Department are assisting doctors in giving the health examinations with the co-operation of several of the faculty members of the Teachers Training Institution.

The health examination record sheets used in this project have been especially prepared for this demonstration by the Medical and Research Division of the American Child Health Association and approved by the State and City

Health departments of North Carolina.

Dentists on Program

Paralleling the medical examination in the fall, three dentists, Drs. A. L. Cromwell, E. B Smith and Clayborn have volunteered their services for giving dental examinations for the three year period of the demonstration. The dental defects will likewise be checked and corrected as soon as possible.

The work for the three years has been organized on a committee basis. Professor Hardy Liston of Winston-Salem Teachers College will serve as chairman of the General Advisory Health Committee and Professor H. L. Trigg principal of Columbia Heights Pubic Schools will act as vice-chairman of this committee. This committee will consist of representatives from the faculties of the Teachers College and public schools, the student body of Teachers College, the parents from the public schools, the medical profession and the nursing service. There will be other committees for specialized pieces of work and groups.

Outlines Sent in

Each teacher in the Columbia Heights public schools and Winston-Salem Teachers College have sent in outlines of their respective courses to the American Child Health Association. These outlines will be returned to them in the fall, paralleled by pertinent health applications and suggestions for interpreting health education in each course to the fullest extent. The fall program also includes an organized group of round-table conferences on several pertinent, health subjects. These conferences will be conducted by leading National and State specialists representing the National Mental Hygiene Association, American Social Hygiene Association, American Red Cross, State Health departments, and the State Public Welfare departments. The purpose of these conferences will be to show and discuss the relations between the community, the physician, nutrition, social hygiene, mental hygiene, character building and the health program and to bring out their many contributions to the various courses offered in the schools.

The significant fact of this demonstration, is that this program has never been developed before and it is anticipated that the printed report of the project will serve as a guide to many institutions and schools in organizing and developing a similar program.

Program Outlined

The health education program as outlined for Winston-Salem Teachers College is indicated below.

Objectives

1. Personal health development:
a. Teachers — Teachers College and Columbia Heights
b. Students — Public Schools (demonstration schools).

2. Development of a well - integrated and functioning health program, through all grades and courses of the Columbia Heights public schools (in order that the student teachers may observe and participate in such a program).

3. Development of a well - integrated and functioning health program in Winston-Salem Teachers College, through

a. Class room instruction (all courses).

b. Living conditions (dormitory, dining room and campus).

Supporting Departments

1. State Department of Public Instruction—A. T. Allen, State Superintendent.

a. Negro Education Division—N. C. Newbold, director.

2. State Department of Health—Dr. Charles O'H. Laughinghouse, State Health Officer.

3. State Department of Public Welfare—Mrs. Kate Burr Johnson, commissioner.

a. Negro Public Welfare Worker—Lt. Oxley.

Participating Groups

1. Winston-Salem Teacher College—S. G. Atkins, president.

2. City School System—R. H. Latham, superintendent.

a. Columbia Heights schools—(3 buildings—1st to the 4th grade, 5th to the 7th grades, high school)—Harold L. Trigg, principal.

3. City Health Department—Dr. R. L. Carlton, City Health Officer.

Program Make-up

1. General Advisory Health Committee—Hardy Liston, chairman.

Education, J. E. Grigsby; science, E. G. Trigg; home economics, Susie Elliott; dormitory, Mrs. Colson; dietitian, Mrs. Conick.

Freshman student at Teachers College.

Sophomore student at Teachers College.

Junior student at Teachers College.

Senior student at Teachers College.

1—All courses in the Teachers College are to be outlined by instructor in two parallel columns—subject matter and health education application. These outlines are to be sent to me by Professor Liston by June 1. I will carefully check these courses with the assistance of members of the association and outside individuals regarding supplementary material, overlapping material, and elimination of material by insignificant value, and will return checked copies to Professor Liston to be distributed to the faculty in time for the fall term.

2—The course of study as outlined by the city for the work in the first through the seventh grade will also be arranged in two columns in topical form as to subject matter and health education application. These will be sent to Professor Trigg for distribution to his teachers.

3—The high school teachers are to outline their courses in parallel columns in topical form—subject matter and health education application, and submit to Professor Trigg, who will send same to me for study, as stated in point 1.

4—On the basis of the work as outlined in points 1 to 3, the fall program will be started.

5—It is planned to conduct study groups with the teachers during the year on specific phases of health education, such as mental hygiene, social hygiene, physical hygiene, community organization, by specialists in these various lines. These specialists will present their subject to the instructors in the Teachers College, from the point of view of what the various specific phases of health contribute to the different subjects. For example it is hoped to have a social hygiene specialist conduct a series of discussions on social hygiene and how it can be taught through the biology, physiology, home economics, education, and other related courses.

6—It is planned that every instructor in the Teachers College will not only have an outline of his own courses but also those given by other instructors in the Teachers College, and also the courses given by the various grade teachers in the three demonstration schools, so that the instructor responsible for the training of the student teachers in the Teachers College will have a birds-eye view of the entire health program as carried on in the demonstration schools and Teachers College.

7—It is planned that the teachers in the demonstration schools will have an outline not only of the subjects taught in her own grade but also those taught by the teachers in the other grades, so that she will have a birds-eye view of the health education work taught in all of the grades in the demonstration school.

8—For the purpose of (1) checking the essentials of a health record form (2) giving practice to the doctors in performing health examinations, (3) getting bases for the health education program on which to build, it is planned to conduct voluntary health examinations at the beginning of the summer school. These examinations will be conducted by a group of negro doctors selected by Dr. Carlton and under the supervision of Dr. Cook, public school physician. The examination will probably be carried on during the second week of summer school in order to avoid the rush and confusion of the registration during the first week. On the basis of the findings of these health examinations of the summer school students, the health examining work of the fall will be given.

The three-year program can be divided in the following way: 1927-28, year of trial and error; 1928-29, year of correction based on 1927-28; 1929-30, year of functioning as based on the two previous years.

TRIBUNE

Concord, N. C.

NOV 16 1927

TUBERCULOSIS KILLS MORE NEGROES THAN WHITES.

Two hundred and two more negroes than whites died of tuberculosis in North Carolina in 1926. During the year there were 2,769 deaths from tuberculosis in all its forms among the white, colored and Indian races in the State. 1,277 whites, 1,479 negroes, and 13 Indians.

Buncombe county, as usual, had the highest death rate from the disease among whites. Buncombe's death rate from tuberculosis is abnormal because of the large number of tuberculosis sanatoria in the county. Next to Buncombe Forsyth had the highest total number of deaths, and also the largest number of deaths from the disease among the colored race. There were 29 white deaths in Forsyth county, and 96 colored during the year. Mecklenburg, Guilford and Wake came next to Forstyh with the number of deaths from tuberculosis. Mecklenburg had 103 white and colored deaths, Guilford 99 white and colored and Wake 90 white and colored.

For every death from tuberculosis careful surveys have shown that there are at least nine other active cases of the disease. This would give a total of 24,903 active cases of tuberculosis in the State at the present time. A number of this army of 24,903 tuberculous do not know that they are infected. The early symptoms of tuberculosis are indefinite. If the 24,903 people who are now infected with tuberculosis in the State could have a diagnosis of the disease made in the early stage and take sanatorium treatment, 93 per cent. of them, according to the statistics of the North Carolina Sanatorium, would recover.

Early diagnosis and treatment are the cures for tuberculosis. If you are one of the possible 24,903 active cases of tuberculosis in the State, or you know anyone who might be, go to a good doctor, ask him what the symptoms of tuberculosis are. Then have him give you a good physical examination, including a thorough chest examination. It won't hurt you if you don't have tuberculosis, and if you do your chance for finding it in the early curable stage is increased many times.

Health—1927

Ohio.

ENQUIRER
CINCINNATI, O.

FEB 11 1927

DECREASE

In Disease Is Shown

Due To Work of Health Clubs, Report Indicates.

Colored Women's Association Said To Be Stamping Out Tuberculosis in West End.

A prediction that a decrease in the number of deaths due to tuberculosis in the West End negro district would be noted at the end of this year was made by Anthony A. Mees at the annual meeting of the Cincinnati Anti-Tuberculosis League last night. Mr. Mees is a lecturer and social worker for the league. In President Charles Bertram's report an increase in deaths was noted in 1926 over 1925.

Mr. Mees, however, predicted that this year would show a noticeable decrease. This decrease, he said, would be the result of the efforts of the Colored Women's Health Club, which has been recently organized in the West End and which is doing increasingly valuable work.

The 1,205 negro women who belong to this health club, Mr. Mees said, are determined to stamp out the disease in their district and spreading among their neighbors the doctrine of cleanliness and correct living. Mr. Mees emphasized the value of the health club. He told of the work it is doing in instructing negro families in the right way of living in order to eliminate tuberculosis. At meetings which the club holds at regular periods the negro women are given health lessons. Mr. Mees spoke of the interest in tuberculosis prevention which is being created in the West End by the women of the health club.

Increase Is Noted.

In his annual report President Bertram stated that health records showed that there had been an increase in deaths from tuberculosis during 1926. In 1925 there were 468 deaths, and in 1926 511 in the city of Cincinnati. An increase in deaths caused by this disease has been noted all over the country during the last year, he said. President Bertram commented on the work of the Tuberculosis Sanitarium and deplored the fact that it was overcrowded at the present time. This condition would be remedied, he said, when new buildings which are provided for in a recent bond issue are erected. He also made note of the fact that the hospital for tuberculosis patients at Longview Hospital is overcrowded. This condition also will be remedied soon by the erection of additional buildings.

President Bertram praised the work of members of the league who have devoted their efforts to the negro district. He said that for some time the death rate from tuberculosis had been increasing in that district, but that in the last few years it was gradually being decreased. He attributed this decrease to the work of the health clubs, examinations of residents of that district and frequent clean-up campaigns.

The value of Kroger Hills Camp for children, educational work among factory employees and lectures in schools and clubs were stressed by President Bertram.

In his annual report Superintendent Dr. Ray G. DeVoist paid particular attention to the Kroger Hills Camp. He stressed the importance of this institution. Last summer he reported 414 children attended the camp. They were instructed in disease prevention and lived for 11 weeks under ideal conditions. At the end of this period it was noted that girls showed an average increase in weight of 3.1 pounds and boys 2.8 pounds. He stated that the cost of keeping each child at the camp was 78 cents a day.

Children Give Demonstration.

Two groups of children demonstrated to the members of the League things that they learned at Kroger hills. One group who attended the camp last summer demonstrated to members the care of their health. The other was a group who had attended the camp 13 years ago. Dr. De Voist called attention to the fact that all were healthy and vigorous and had practiced the things they had been taught at the camp.

Dr. De Voist also lauded work being done in schools and at factories. His comments on this work was along the same line as that of President Bertram. He thanked heads of the various departments of the league for their co-operation during the last year.

Officers of the league elected at the meeting last night were: President, L. P. Lewis; First Vice President, Laurence Mitchell; Second Vice President, Dr. C. A. Neal; Third Vice President, Moses Strauss; Treasurer, W. L. Schneider; Secretary, Bleecker Marquette, and members of the Board of Trustees, Dr. Ralph G. Carothers, Edmund Kerper, C. M. Stegner, Henry W. Backus, Henry Bentley, Charles Bertram, Dr. Paul Cassidy, Dr. Kennon Dunham, Sol H. Frieberg, Dr. Henry Germann, Edwin L. Hitchens, Dr. Samuel Iglauer, Chester F. Kroger, Albert F. Levi, Louis P. Lewin, B. H. Kroger, Dr. Frank H. Nelson, Bleecker Marquette, Laurence Mitchell, William H. Muench, Dr. C. Aleshire Neal, Dr. William H. Peters, E. J. Rieckelman, William L. Schneider, Murray M. Schoemaker, A. F. Sommer, Moses Strauss, Dr. J. L. Tuechter.

Health—1927

Pennsylvania.

THE ELKS AND INFANT MORTALITY

The Improved Benevolent and Protective Order of Elks is rendering a distinctive service to the Negro race in this country by obtaining statistics on the actual mortality of Negro children through a survey of every community of over 5,000 in which Negroes constitute ten per cent of the population and planning necessary steps to reduce the mortality of Negro babies. A commission provided for at the last grand lodge session is now actively engaged in the work. The true status of Negro longevity has never been known or clearly defined because only part of the country is in the registration area. The work planned is comprehensive and the statistical report will be very complete.

This is an excellent example of the sort of work that our fraternal and other organizations can do. It is estimated that our infant mortality rate is almost twice as great as that for white children. Education, sanitation, personal hygiene and improved economic status can reduce our infant mortality to a minimum. At present it is a great physical, pschological and financial strain on our group which cannot be tolerated. No more constructive public service has ever been performed by one of our fraternal organizations than this effort of the Elks. It is a great credit to them.

START A NEGRO HEALTH CLUB

By Algernon B. Jackson, M. D.,
Howard University

Philadelphia has already done it. Why not do it in your home town? A Negro Health Club has been formed by the Philadelphia Health Council and Tuberculosis Committee to assist in maintaining the Negro clinics conducted by the council, the Henry Phipps Institute, the Chest Department of Jefferson Medical College and the Whittier Center, under the name of the Negro Bureau. These clinics are so located throughout the city as to make their services easily available to the white colored population.

During the year 1926 many thousands visited these clinics. The report shows 12,450 dispensary visits, 9,290 medical examinations and 13,629 home visits by nurses. It would be wonderful if figures could show how many lives have been prolonged and saved by these examinations, visits, and the instructions given.

Each patient who visits one of these clinics receives a thorough physical examination if needed and advice from the examining physician. Where necessary the visiting nurse goes to the home of the patient and instructs him how to properly care for himself. The other members of the family are also taught how to protect themselves from the disease and to build up their physical resistance.

Philadelphia colored people have the right idea and if they persist in it, the death rate from tuberculosis will be cut down. This is the only way to save our people from a foe which demands a terrible toll every year. The cost of preventable deaths to a developing people is tragic and overwhelming. Why not start a Negro Health Club in your home town? In our next article we shall tell you how Philadelphia did it. Maybe you can improve upon their idea.

Start a Health Club

By Algernon B. Jackson, M. D.
Howard University
(For The Associated Negro Press)

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Plan To Preserve Community Health

By ALGERNON B. JACKSON, M. D
Director Department of Public Health
Howard University, Washington, D. C

(For The Associated Negro Press)

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Health-1927

South Carolina.

CHARLESTON
SOUTH CAROLINA
JUL 5 1927

Negro Mortaility and Homicide

For many years the South has had a bad name that she did not deserve by reason of the failure of the Bureau of the Census to discriminate in statistics of death and crime between the races, but a report, published July 4, indicates that the Bureau is correcting its ways.

The synopsis of this report discloses that, while the death rate among negroes is high everywhere, so high as to give an unhappy impression about health conditions in the South, it is much lower in the South than in the North. In Georgia the rate of death of negroes to the thousand was 14 in 1924 and 41.9 in Wyoming, 28.8 in Idaho and 27.6 in Colorado.

The negroes thrive better where they are acclimated where they have room and fresh air, where extremes of heat and cold are not common, and where food is plentiful and cheap.

Perhaps a Northern man seeing a log cabin in the pinelands in which negroes live is shocked at its squalor, and perhaps he has never been in the crowded slums of Pittsburgh where the white as well as the colored poor want the comforts so easily supplied in the Southern country.

The homicide rate among negroes in the South is indeed frightful and shameful, and the white people have upon them the responsbility and the duty assiduously to improve conditions so that it will decrease. In 1924 it was 40.1 for negroes to 100,000 and only 8.5 for white people, but it is not for the white people to stand apart and persuade themselves that this is none of their business, that it should not be on their conscience.

The whole South is disgraced by the appalling homicide rate that afflicts the Southern negroes and it is for the conferences on inter-racial relations, the welfare organizations and, more than all, for the courts and the legislatures to labor for the mitigation of this great evil. If the ignorance of the negroes is the principal cause of it, white people, who are the governing part of the population, who have most of the wealth and leadership, should see that the negroes have the schools and the teachers that will re-

CHARLESTON
SOUTH CAROLINA
JUL 20 1927

NEGRO TEACHERS GET HEALTH WORK

Credits Allowed — Charleston Association First to Give Course in School

The first course in health work actually to be included in the curriculum of a school and maintained through the efforts of a tuberculosis association was established yesterday in the summer school now being conducted in the Burke Industrial School for the colored teachers of this county.

The course is sponsored and provided by the Charleston County Tuberculosis Association, and will consist of a series of lectures to be given twice a week by Miss Rachel Mayo, field nurse of the association.

Mrs. D. McL. McDonald, executive secretary of the State association, has informed the local organization that this is the first instance of its kind in the country. The most important accomplishment up to this time has been the introduction of a course of two or three lectures during the school year.

A member of the faculty announced at the session yesterday that the teachers would be allowed full credit for the semester hours expended on the course.

The opportunity of a thorough physical examination will be provided by the association as a part of the course, and a large majority of the 125 teachers in attendance at the summer session have already signified their intention of taking the examination.

W. Atmar Smith, M. D., will be the physician in charge. He will be assisted by Miss Mayo, by Elliott Harrison, recently appointed interne at the Pinehaven Sanatorium, and by Mrs. Ashley Hasey, executive secretary of the county organization.

Barnwell S.C.
Sentinel
MAY 19 1927

Negro Health Club Will Meet Tonight

A short time ago the colored people of Barnwell organized a Health Club, and in furtherance of the work a meeting will be held tonight(Thursday), the 19th inst., at 8:30 o'clock at the Bethlehem Baptist Church in this city. Three-minute talks will be be made by Col. Edgar A. Brown and Solomon Blatt, Esp., of Barnwell, and D. McL. McDonald, of Columbia, who has visited Barnwell before in the interest of health work. Short talks will also be made by D. J. Dixon, M. D, and Minnie Eve. The Rev. A. Chas. L. Arbouin, pastor of the Bethlehem Baptist Church, will preside.

A special feature of the meeting will be the singing of negro spirituals by a choir of good voices. The public generally is invited to attend and many white people have already signified their intention of being present.

FLORENCE, S. C., Mo

JUL 10 1927

NEGRO DEATH RATE INCREASING

The death rate among negroes is increasing we are told by the Bureau f Census, Department of Commerce, in its carefully compiled mortality statistics. This is due to the mirgration of the negroes from the South to the North and West. It is interesting to note that Wyoming leads in the number of deaths of negroes per 100,000 with 33.8 in 1922 and 41.9 in 1924. The negro death rate in Idaho was 15.2 in 1922 and 28.8 in 1924, and that of Colorado 29.9 in 1922 and 27.6 in 1924. These three States have the highest rate per negro population. Georgia has the lowest rate with 12.2 in 1922 and 14.0 in 1924. All Southern States run low. And while we are dealing with figures it is worthy of mention that South Carolina has the lowest suicide rate, 4.1 per 100,000.

Health – 1927

Tennessee

BETWEEN the ages of 6 and 16 colored children were found to be both taller and heavier than white children of the same age in an extensive study recently reported by the Rutherford County (Tennessee) Child Health Demonstration. At 16 the difference practically ceased, in fact the white children tended to exceed the colored slightly in both respects. "The consistency in differences shown in this and other investigations would seem to indicate that the colored race has a growth cycle which differs in many respects from that of the white," say Drs. H. S. Mustard and J. I. Waring in a report of the study in the American Journal of Public Health. They urge that further data be obtained as the basis of special standard tables for colored children if the differences continue to be confirmed. Reprints of the study may be obtained from the

NEWS-SENTINEL
KNOXVILLE, TENN.

FEB 27 1927

GOOD TEETH FOUND AMONG SHILOH PUPILS

The little Shiloh school for negro children on S. Broadway with its two rooms may be one of the smallest school in town in numbers, but it ranks high when it comes to teeth.

The school will soon be one hundred per cent perfect, judged by the teeth of its pupils, according to Miss Catherine Flynn, director of the public health nurses.

The children who had bad teeth have been brought to the dental clinic at the Health Center and now nearly all of them have hygienic mouths.

BANNER
NASHVILLE, TENN.

MAY 10 1927

PHYSICIANS' PAPER RECEIVED IN DIGEST

Obscure fever in children is considered to be the result of heat, according to the theory of Dr. Scott J. Wilkinson, resident physician at Vanderbilt hospital, and of Dr. Katherine Dodd, assistant staff physician. The findings of the two local physicians are embodied in a report to the Journal of the American Medical Association which is reviewed this week in the Literary Digest. The theory holds that Negro children are not susceptible to fever under heat conditions, while white children suffer.

"Five infants whose fever was definitely caused by external heat not only had fever, but were restless and irritable," the report is quoted. "As soon as they were placed in a comparatively cool room with moving air, their temperatures became practically normal, and they were quiet and contented. Colored children were not similarly affected by the heat. Similar heat exhaustion with fever has often been noted in adults in the tropics and in the southern United States. Extreme degrees of external heat, such as occur in the southern part of the United States during periods of the summer months, may be a cause of fever in white infants. This fever can be prevented or eliminated by placing infants in an artificially cooled room supplied with moving air."

COUNTY HEALTH WORK ENLARGED BY BACON

Nurses Added to Department and Program Outlined.

With two registered nurses added to the force of the County Health Department, Col. William J. Bacon, county commissioner of health, yesterday announced a comprehensive plan which will be adopted and practiced by the department in the future.

Mrs. Alice King, who for several years has been connected with the Shelby County Tuberculosis Society, and Miss Gladys Mosby, a recent graduate fromthe General Hospital, were the new additions to the nursing department. They began their service yesterday.

Loke Gaul, Shelby County will be divided in four parts under the new plan of Col. Bacon. Four sanitary inspectors and four nurses will have charge of the health conditions in the four districts, and it is upon their recommendation that the corps of physicians will [illegible].

District No. 1 includes all of Shelby County west of Pigeon Roost Road and south of Nonconnah Creek. This district will be under the jurisdiction of [illegible] as sanitary inspector and Miss Katherine Smith as nurse.

Sanitary Inspector G. W. Lurry and Miss Jessie Kersh, nurse, will have charge of the second district, which is bounded on the north by the N., C. & St. L. Railroad to Wolfe River, and along the river to the Fayette County line.

District No. 3 lies north of the city limits with the Illinois Central belt to the Ioosahatchie River, thence along the river to the Fayette County line, and Sanitary Inspector Louis D. Horne and Miss Gladys Mosby, nurse, will confine their activities within this territory.

The fourth district's health conditions will be taken care of by Sanitary Inspector J. M. Wiley and Mrs. Alice King. This district comprises all of Shelby County not in the city of Memphis and not contained in the other three territories.

Dr. L. M. Graves, superintendent of the board of health, and Col. Bacon believe that this system of working in the county will greatly facilitate matters in giving to the residents of the outlying districts the greatest benefit from the work of the officials.

Health department officers are encouraged by the manner the people in the rural districts ar responding to the clinics now being conducted by Dr. Graves and Dr. C. W. Polk, director of child hygiene. On Monday 1,006 persons received free smallpox vaccinations or typhoid fever innoculations.

MAY 30 1927

NEGROES BOOST CYNTHIA'S FUND

$325 Is Added; Hope to Double Amount Next Year

Negroes of Memphis showed their interest in the Cynthia Milk Fund Saturday when students of the Booker T. Washington High school sponsored a milk pail collection and turned in $325.07.

It was the largest amount ever raised among the negroes and indicated their appreciation of the charity, sponsored by The Press-Scimitar, that supplies milk to the unfortunate children of all races during every day of the year.

The school organization was divided into two forces, one of which worked during the morning and the other during the afternoon. Each delegation was accompanied by a band from the school. D. Canale Co. furnished the truck that carried the band on a flying concert tour Saturday morning.

The organization was in charge of Prof. G. P. Hamilton, principal of the school.

"Every section of Memphis was represented in our organization," said Hamilton. "We are glad we did so well but rain interferred with the morning solicitation. Next year we hope to more than double this year's collection."

BANNER
NASHVILLE, TENN.

JUL 28 1927

HEALTH OF NEGRO CHILD DISCUSSED

National Association of Colored Teachers Hear Talks by Educators.

The health department of the National Association of Teachers in Colored Schools held an important discussion meeting this morning at the A. and I. State Normal college. Short talks were delivered by Dr. J. J. Mullowney of Meharry, Miss Lucy Oppen of New York, Dr. Roscoe C. Brown of Washington and others on such subjects as "Fighting the Plague with the Negro Child," "Care of the Teeth," "Venereal Disease Control and Sex Education," and "Health for the Negro Child in Rural Districts."

This morning was entirely taken up by departmental meetings in preparation for the afternoon's open discussion meeting which was to deal with the measures of efficiency worked out by W. A. Robinson, president of the organization, and H. C. Trenholm of Alabama.

At the Wednesday evening session, W. A. Robinson gave a survey of the work done in the past year and outlined the tentative policies for the future. He declared that the thinkers of the South realize that it is a dangerous as well as an unjust public policy to forbid adequate educational opportunities to the masses of the Negro people and that it is the duty of the Negro race to organize and help this group of Southerners to carry out their convictions.

Dr. Thomas E. Jones, president of Fisk university, discussed the place of character training in the educational program. The national association, which will continue its meeting through Friday night, has for its convention-subject "The Negro Child."

BANNER
NASHVILLE, TENN.

NOV 20 1927

CHRISTMAS SEAL CAMPAIGN OPEN

More Than $60,000 in Stamps Are Distributed by Letters in County.

"Take out a health policy now."

That is what the Davidson County Anti-Tuberculosis Association is saying to its friends all over the county.

The little tuberculosis Christmas seal has been aptly termed a penny health policy, and hundreds of these stamps are now lying on desks in business offices and on shelves or tables in private homes, as the association mailed out nearly 30,000 letters each enclosing $2 worth of the stamps a few days ago. The association executives have made the appeal that the persons receiving the seals do not throw them aside but buy or sell them and thus make an investment for future health and happiness.

These mail letters formally inugurated the Anti-Tuberculosis Association's annual seal sale campaign. Since the seal letters went out, the association has received a number of communications from persons giving their endorsement to the campaign and from others, who spoke in appreciation of the attractive design used for this season. The little stamp carries a picture of Santa Claus in his reindeer sleigh with the double cross, the symbol of the National Anti-Tuberculosis Association, held aloft. By buying Christmas seals, one helps Santa Claus scatter health and joy along the way, the little seal seems to say.

Among the communications received giving endorsement to the seal sale was one from the Brew clinic, which also sent a check. The medical profession of the city and county generally was reported to have given unqualified endorsement to the campaign which has for its mission the raising of funds with which to carry on the work of ridding the county of the dread disease.

The anti-tuberculosis stamps being distributed over Davidson County.

Another communication came from the Rev. Preston R. Taylor, president of the Colored branch of the Y. M. C. A. and a well known leader of his race, who wrote that his people welcomed the opportunity to cooperate in the seal campaign by buying and selling the little stamps. He also expressed appreciation on the part of his people for the supplies of medicine and educational literature, which the association has distributed among the colored schools of the country.

The report from the National Anti-Tuberculosis Association's office has been that seven years have been added to the duration of the average man's life through the development of the Christmas seal only 18 years ago. Those who bought seals helped to subtract 100,000 names from the annual death roll from tuberculosis, the report said. The report further said that the tuberculosis death rate has been cut one-half from what it was twenty years ago.

"Buy Christmas seals and wipe out tuberculosis altogether," is the association's yuletide proclamation.

Health – 1927

Texas.

DALLAS VITAL STATISTICS—COMMENT FROM DR. R. T. HAMILTON

I have just received a copy of the report of the Bureau of Vital Statistics for Dallas for 1926 I find that it contains much that ought to be of general public interest, and that should receive serious consideration from the leaders of our group, and more than passing notice from all public spirited citizens. I am therefore asking that you publish in the columns of your valuable paper the following comparative statement white and black mortality in Dallas from principal disease, as revealed by this report.

During the calendar year 1926 there were 2726 deaths in Dallas, of which 1976 were whites, 636 blacks, 114 Mexicans. For the whites this is 60 more deaths than occured in that group in 1925, 5 more blacks, 4 more Mexicans.

Estimating the white population, including the Mexicans, at 225,000, and the Negro population at 30,000, the white death rate is Dallas in 1926 was fraction more than 9.28 per thousand, while the Negro death rate was 21.3 per thousand. Our death rate in Dallas then was more than twice as large as that of the whites, Mexicans included. We constitute a little more than 11 percent of the population of the city, and contributed a little more than 23 percent of the deaths. There are many reasons for this, but in my opinion it is the main due to the unsanitary conditions in which a large percentage of our people are forced to live. This is readily seen when we recall that a careful survey made two years ago by the Dallas Inter-racial Commission showed that 31 percent of Negro homes here were barely habitable, "and 19.2 percent were unfit for habitation, and actually ought to be destroyed.

Despite the fight that is being waged in ous city against tuberculosis by various health agencies, this disease still ranks high in the mortality report, it being surpassed only by pneumonia. Of 177 deaths from tuberculosis of all kinds, 88 were whites, 65 blacks and 22 Mexicans. 60 of the Negro deaths from this disease were due to tuberculosis of the lungs, and 5 to tuberculosis of other organs of the body. 80 whites and 18 Mexicans died of tuberculosis of the lungs. About 1 person in every 2000 of white population, including Mexicans, died of tuberculosis, whereas in our group a little more than 2 persons died of that disetse in every 1000. It is seen then that our death rate from this disease is 4 times that of whites. This portion of deaths between the races from this disease has remained about stationary for the past several years.

The mortality from pneumonia was 177 whites, 113 blacks, 31 Mexicans. As indicated above more Negroes died of pneumonia than of any other one disease. For the whites, disease of the heart and circulartory system lead the list with 219 deaths. Negro deaths from these diseases amounted to 49. 133 whites, died of cerebral hemorrhage (apoplexy) while 42 Negroes died of this disease. 129 whites died of various forms of kidney diseases (Bright's). 61 Negroes. Influenza carried away 91 whites, 29 blacks, 4 Mexicans. 53 of the whites had lung complications with the disease, 13 blacks, 2 Mexicans.

Social disease were responsible for 21 whites and 16 Negro deaths of these, 15 whites, 14 blacks, 2 Mexicans died of syphilis—the most dreaded of all social diseases. Other deaths from social diseases were due to gonococus infection Thus our group, which is a little more than 11 percent of the population, contributed about 50 per- of the deaths from syphilis. This is due to the fact that more whites continue to take treatment for the disease until blood aests show the system to be entirely free from the germs, whereas most Negroes stop treatment as soon as primary lesions disappear. Our large death rate from other diseases is due in a great measure to the taine of syphilis in the blood so many, which lowers resistance and weakening the entire system.

Cancer is a little more prevalent in the white race than in the black. 175 whites died of this disease, 22 blacks, 1 Mexican. However 1920 United States census report showed the Negro death rate from cancer in the registration area had risen from 3.8 in 100,000 in 1880 to 50.4 in 100,000. 24 whites and 12 blacks died of pellagra. 40 whites committed suicide, 2 blacks. 105 whites were killed in automobile and motorcycle accidents, 9 blacks, 1 Mexican. 26 whites died of diabetes, 5 blacks, no Mexicans.

There were 63 deaths from homicide (murded) during the year, of which 24 were whites, 39 blacks, no Mexicans. Of the 39 homicides of black, according to police records, only 2 were committed by whites and they were committed by officers of the law while attempting to make arrests. The police records also show that there were 83 charges of assaults to murder with deadly weapons filed against Negroes during the year. A goodly percent of these charges were filed against Negro women. Our death rate from homicide is 1.3 per thousand, whereas that of the whites is about 1 in 9 thousand. Statistics show that there is a large Negro population the proportion of black to white homicide is about the same as in Dallas.

During the year there were recorded 442 deaths under one year of age, of which 319 were whites, 81 blacks, 42 Mexicans. The white infant death rate per 1 thousand births was 90, that of the black was 162. However our infant mortality is not as large as these figures indicate, because there are several hundred Negro babies born in Dallas each year that are not reported to the Bureau of Vital Statistics, whereas practically all deaths are reported.

There were 193 still births during the year, of which 129 were whites, 55 blacks, 8 Mexisans. Appendicitis was responsible for 50 deaths among the whites, 11 blacks 1 Mexican.

There were 4783 births, 2019 white males, 1949 white females 266 black males, 284 black females, 130 Mexican males, 135 Mexican females. There were 85 more Negro deaths recorded than births, the total being respectively 636 and 550. There has never been a year in the histoory of the Health Department when births in our group exceeded the deaths. Since the Negro population shows a steady growth in this city thin indicates, as stated aboce. that there are a large number of Negro births that are never reported to the Health Department. All deaths are recorded as the undertakers are required by law to secure permits from the Health Department before burials are made, and it is safe to say that they observe the law.

Twenty one per thousand of the population is indeed a high mortality rate. We should do all in our power to reduce it. A close observance to the rules of health on the part of individuals, and better housing conditions will do it. This is largely a matter of education. The problem is a challenge to our schools, our churches, our physicians and all others who are interested in the welfare of our group.

Very respectfully,

R. T. HA[illegible], M. D.

BETTER HEALTH PLEAS WINS SEWER LINE ON COCHRAN STREET

As the result of a plea made last week before the Board of Commissioners by Negro property owners on Cochran street between Routh and Leonard, headed by Lon Moore, a lateral sewer line is to be installed at no cost to the owners who will be benefited by it. The main argument menaced the health of the neighborhood and that in the face of the fact that the Negro death rate for Negroes was considerably higher than that of the whites, higher than that of the whites every available means of making more sanitary their living condition should should be made by the city.

Owners of property in that neighborhood have been seeking the placing of a sewer line for several years. It will soon become a reality as the result of the conference. The petition was turned over to Commissioner Gowins for recommendation on Wednesday of last week. The decision of the of the Commissioner was indicated later in the week when the city engineer was ordered to proceed at once with the work of installation. The line will extend from Routh to Leonard on Cochran and the cost will be borne by the city. The installation of this line will mark one of the rare cases in which the city has borne the costs in such an instance.

ANNUAL HEALTH CONFERENCE FOR NEGRO CHILDREN

The seventh annual health conference for Negro children will be held on June 6-7, at the Y. W. C. A. Center, 506 Louisiana Street. The purpose of these conferences as held by the public health nursing department of the Social Service Bureau for the past seven years, is to give every child the opportunity of a thorough physical examination, and to give the parents the opportunity of knowing and correcting defects during early childhood.

For the past 10 years the energies of the school hygiene department has been spent in discovering and correcting defects among its school children. The opinion of child health experts is, that much can be done, during the pre-school age, toward bringing about a greater degree of physical fitness before their entrance into school for the first time.

During the past 7 years, 527 children have been examined, of which number 151 have returned yearly, and each year shows an increased number of parents interested and children with defects remedied. This year much better facilities have been obtained for the use of these clinics and two full days will be given to the work with physicians, dentists and nurses in attendance, with Miss Fritsch in charge.

Appointments can be made by ringing Preston 1228. Time of examination on both of the days will be from 9 to 11:30, and from 1 to 3:30. Parents who are interested in these examinations are requested to register their children as early as possible.

The following local organizations are co-operating: Colored Y. W. C. A., Charles A. George Dental Society, Houston Inter-Racial Commission, Harris County Medical Society (colored), Colored Ministerial Alliance, and Nursing Department, Social Service Bureau.

NEW NEGRO AND NEW DISEASES

Vital statistics of the leading Negro fraternal orders and insurance companies doing business in Texas, made public during 1926 and 1927, indicate that the Negro race is being victimized nowadays by new diseases—that is, by the diseases which formerly had no terrors for black men and women.

Formerly tuberculosis and pneumonia claimed the majority of the insured in the various Negro secret orders and insurance companies, but now diseases of the heart lead the field; showing that the "new Negro" is being afflicted with "new diseases."

Of course, diseases of the heart cover a multitude of complaints and maladies, yet more of our people are dying from this disease than from those which heretofore claimed so many of our people.

Close on the heels of diseases of the heart come diseases of the kidneys, with apoplexy occupying a high position in the mortuary column.

Most medical and scientific authorities are agreed that these modern diseases are the result, more or less, of a fast civilization and the fact that Negroes are falling victims to these modern diseases is undoubtedly an indication that our people are going too merry a gait.

Some attribute this alarming showing in diseases of the heart and kidneys to bootleg liquor and other home-brew concoctions; contending that no such situation obtained during the days of "better booze and bigger barrels," when a saloon was located on every strategic corner, while today a brewery or still is an important adjunct to many households!

The fact remains, however, bootleg liquor or no poisoned hootch, that too many Negroes are dying from complaints and diseases which constitute the penalty of speed, excitement and modern methods of living, and The Informer is of the opinion that our medical authorities and health leaders will be forced to adopt a new educational campaign and teach our people how to "take their feet off the accelerator!"

For years our medical and health leaders have been teaching our people how to reduce their mortality against the "white plague," and other dreaded diseases, and the result of this educational campaign has been the reduction of death from such sources to a much lower level than it has been since the Negro became free and sought to work out his destiny "under his own vine and fig-tree."

As soon as victory was about to perch upon our racial standards in this respect, it was discovered that Negroes are worrying too much, mostly about imaginary ills or nothing at all; that they are making too heavy exactions on their hearts and kidneys by the food they eat, the manner in which they eat it, the various concoctions they imbibe, loss of sleep, et cetera.

Such recent diseases (if such they can be termed), in the main are the result of leisure and freedom from labor; for an "idle brain is the devil's workshop," and very few people die with heart trouble or kidney diseases due to hard work, attending to their own business, living sensibly and wisely and not falling for all the "mess" and "gossip"—calculated to precipitate worry, uneasiness and quick pulsation of the heart, as well as mental strain and flurry —which is often conjured up in the mind of some other idler or busybody.

Why, it is alarming to see and hear so many young Negro women talking about being afflicted with "nervous spells" and "bad hearts"; while entirely too many young men are victims of heart and kidney diseases!

There is something wrong with our racial mechanism, and the time is ripe for some eminent diagnostician to diagnose our case, prescribe the medicine and endeavor to get this patient, racially speaking, back on the road to recovery; or at least away from these modern diseases of the heart and kidneys—the apparent aftermaths of fast living, worry and idleness.

Health—1927

Virginia.

NEGRO DEATH RATE DOUBLING THAT OF WHITE RACE SAYS DR SOUTHGATE

NURSES GRADUATE TO FIGHT DEATH-RATE

Graduates of Hampton Training School for Nurses Receive Diplomas.

Hampton Institute, Va. "The fact that twice as many Negroes as whites are dying each year, which means twice as much sickness and double the suffering, as well as an enormous loss of man-power, indicates the field for service presented to the graduates of the Hampton Training School for Nurses," Dr. Southgate Lee, of Norfolk, declared in his address at its fourteenth commencement. Dr. Lee, who has been active in civic health betterment movements in Norfolk, and who recently made a plea before Interracial Commission in Atlanta for a constructive health program for all groups of the South, said: "Follow the golden rule in nursing. Yours is a work of helping humanity. Twice as many Negroes as whites are dying. This means twice as much sickness and twice the suffering. Forty per cent of those who die each year ought not to die. Get this message all over the South. Each one of you teach these facts and lead in the work of changing them. Tuberculosis among the colored people of Norfolk is five times as prevalent as among the white people. People must be brought to realize that they have got to avoid communicable diseases. The housing problem is such that results are hard to obtain. Teach sanitation, better food for the babies, proper ventilation, and proper bathing facilities. Trained nurses are the best leaders in this work."

Dr. Lee was introduced by F. W. Darling, of Hampton, president of the board of directors of the Dixie Hospital and the Training School for Nurses, who presided during the exercises. Nurse Louis Stevens, a graduate in 1902, and now nurse for schools of Elizabeth City County, Va., describes the conditions under which the first graduates of the school received their training. "The new Dixie Hospital is the consummation of the sprit of the old Dixie," she declared.

The class address was made by Nurse Ruth Holly, who said that ignorance and indifference to the laws of health were giving the nurse great opportunity for community health betterment and offered a challenge to each of the graduating class. After repeating the Nightingale Pledge, the graduating class was given diplomas by Dr. George P. Phonix, vice principal of Hampton Institute.

Colored
6-10-27
Nashville, Tenn.

SEP 1927

TUBERCULOSIS AND THE NEGRO

(Roanoke Times)

Serious attention must be given by the whole country to a report made at a meeting of the negro order of Elks in New York City last week. For the study of the health conditions of the colored people of the United States was based on reports from more than 400 cities and towns of this country. The relations between the races are too intimate for any one not to be concerned in the conditions here shown. No man liveth to himself. The colored people come into our homes, our stores, our places of business. The contacts are of a kind that cannot be avoided.

The report has already excited interest among national and state health officials and insurance companies. The American Public Health Association has tendered its assistance, including financial aid in the preparation of a detailed report on the subject and its general publication.

For the report to the colored Elks showed negro health conditions generally worse than they have even been in the history of the country. The condition is attributed generally to poor housing conditions and lack of proper sanitation, especially in the larger cities, to which negroes in large numbers have been crowding in recent years. The appalling infant mortality is attributed to ignorance, malnutrition and poor living conditions.

The chief cause of deaths among the negroes were given as tuberculosis, pneumonia and whooping cough. Of 154,000 deaths last year in the cities of which records were available, 40,000 were attributed to tuberculosis. The percentage of negroes dying of tuberculosis was given as four times as great as among whites. It may be remarked in this connection that Virginia is among the foremost states of the Union in attacking this problem. The state tuberculosis hospital for negroes at Burkeville, known as Piedmont Sanitarium, is achieving results in the treatment and cure of this disease that merit national recognition, just as Virginia's institution for the treatment and care of the negro insane—the Central State Hospital at Petersburg—has long been regarded as one of the foremost in the country in the value of the results achieved.

Health officers have long recognized a peculiar distinction, the cause of which is not entirely apparent. Negroes are less susceptible to the whole realm of fevers which are the white man's deadly enemy. They seem less susceptible than the white man to cancer. But in all diseases of the respiratory system—influenza, pneumonia, bronchitis and tuberculosis, the mortality of the colored race is usually much greater than that of the white.

There is a field here for real scientific investigation and for substantial and beneficial public service. If the negro who moves from the open air life of the farm to the overcrowded tenement of the large city is to become the victim of disease, it would appear that there is a new argument and a new meaning to the "back to the farm" movement. Even in cities of lesser size, the report challenges attention and demands a new survey of housing and sanitary conditions. Good municipal housekeeping cannot tolerate any condition that spreads disease among any element of the population.

BRISTOL, VA.-TENN. HERALD

OCT 1 1927

WHITE DEATH RATE IN VIRGINIA FROM TB IS INCREASING

At Same Time Decline is Shown Among the Negro Race in This State

SCARCITY OF MONEY SAID TO BE CAUSE

Encourages Localities to Establish Pavillions at the Sanitoria, Letting Them Pay Half the Cost of Care

RICHMOND, Va., Sept. 30. (AP)—Tuberculosis, the dreaded "white plague" in 1926 caused an increase in the white death rate, while that of the negro showed a decline, accordin to the annual report if Dr. Ennion G. Williams commissioner of the State Board of Health as made known here today.

White Death Rate More

Taking the rate of the races together, however, the report shows that the percentage is 3.2 below that of 1925. During 1926 the white death rate from tuberculosis rose 1.3 and the negro rate fell 18.2.

Miss Agnes D. Randolph, director of tuberculosis education, has suggested that the probable cause of the increase of death of white people was "temporary scarcity of money in the rural sections," and Dr Williams observes in his report that "her hypothesis is strengthened by the pellegra increase, pellegra being a disease due to improper and insufficient feeding."

Not In Accord

Although Miss Randolph praised the policy of state aid for local hospitals which will take tuberculosis patients, Dr. Williams declares his position is not accord with the idea "that we should subsidize regional or district hospitals" for this work. In this connection he says: "I think it would be far better for us to encourage localities to establish pavilions at the sanitoria, letting the localities pay half the costs of care and the state the other half. I do not propose this as a desirable policy; but if the situation requires efforts beyond these we are at present making, I consider this as far preferable to the alternative offered by Miss Randolph. We can never tell how far a subsidy may carry us; while at the sanitoria our limit of capacity for care is determined by the amount given by the general assembly."

RICHMOND
VIRGINIA
OCT 3 1927

NEGROES ARE LESS NUMEROUS IN VIRGINIA.

DR. ENNION WILLIAMS doubtless states the fact when he affirms that if the Negro death-rate in the state remains as high as it is, while the birth-rate continues as low as at present, Virginia, before many years, must face a reorganization of her labor as drastic as that of 1865.

The Negro death-rate is approximately half as high again as the white rate. Negro births, contrary to the general opinion, are not much more numerous than those of the other race. Conditions have not greatly changed from what they were a decade ago, when a statistician of the health department of Virginia computed that if no new Negroes came to Virginia and none emigrated from the state, the race would be extinguished in about 150 years.

This is not the only serious factor threatening the future of the Negro race in Virginia. Many Negroes are becoming peripatetic in their work. As soon as the winter is past, they hurry North in thousands, when the steel mills are busy. Another exodus occurs when the coastal summer resorts are opened. Often these Negroes do not return until late in the autumn, and then, in many instances, they try to live through the year on what they have earned during the summer. They are free to do this, of course, but they lose the economic advantage that comes from regular employment and they create an atmosphere of impermanence that is demoralizing to those of unstable temperament.

The contention sometimes is made that Virginia has to face these serious industrial alternatives: Either she must improve the health of the Negro population and keep it satisfied by decent living conditions, or she must frankly assume that this source of supply is being exhausted and must look elsewhere to replace it. In a larger sense, these proposals are not alternatives. Virginia needs to keep her Negroes healthy and content, no matter whether she succeeds or fails in attracting new agricultural labor. Her advancement will be served by working to both ends.

~~NEWS~~
STAUNTON, VA.

OCT 1 1 1927

THE REAL DRAIN ON NEGRO POPULATION

Dr. Ennion G. Williams, State Health Commissioner, is concerned over the high Negro death rate and the relatively low Negro birth rate. He fears that unless something is done to check the present trends, Virginia will soon find itself with a Negro population too small to furnish labor for the industries that owe a large part of their prosperity to the utilization of Negro workers. The story which Dr. Williams tells is not news, and fortunately it would seem to be no longer as alarming as it was when first recounted. According to Dr. Louis I. Dublin, statistician for the Metropolitan Life Insurance Company, the Negro's expectancy of life, which a few decades ago compared very unfavorably with that of the white's, is now lengthening. The average expectancy of Negro males is now only one year less than that of white males, while that of Negro females is but two years less than that of white females, and the averages for the two races are constantly tending to approximate each other. If this tendency continues, there will be little to fear as to the Negro death rate, and if the death rate falls, there will be no great cause for concern if the birth rate also declines.

A much greater cause for anxiety is to be found in the tendency of Southern Negroes to migrate to Northern and Eastern communities. The migration is more likely to deprive Virginia and other Southern States of a valuable labor group than the forces to which Dr. Williams directs attention. If Virginia wishes to conserve its labor supply—and it goes without saying that it does—measures will be needed to make the Negro workman content to remain here. Better wages for Negro workers and better living conditions for Negro families will help to bring this about. Negroes are attracted to the North by offers of better pay and by the prospect of living conditions more in conformity with their desires as individuals. Virginia and the South generally can not hope to restrain those who would migrate except by offering comparable inducements here. The Negro is entitled to improved living conditions as a matter of justice, but justice is not the only consideration. Enlightened self-interest on the part of Southern communities also calls for improved housing, better recreational facilities and better streets for the use of the Negro populations. Without these facilities, the South can not hope to bid successfully against other sections for the more aggressive and more able types of Negro labor.—Norfolk Virginian-Pilot.

Harrisonburg, Va. Progress

SEP 30 1927

NEGRO BIRTH RATE FALLING

Death Rate Reported Higher Than Among Whites

Richmond, Sept. 30.—Declining birth rates of negroes in Virginia and a ratio of deaths from 50 to 75 per cent higher than the white race are giving the state board of health serious concern. In fact, according to the annual report of Dr. Ennion G. Williams, state commissioner of health, for 1926, racial statistics are regarded as significant to the point that he asks "are we on the verge of another re-adjustment of our economic life?"

"We have been accustomed to thinking that the high death rate among the negroes was balanced if not counter-balanced by the high birth rate," says Dr. Williams in his report," and we have continued to think this condition would assume an equipoise between the races. We can no longer hold that delusion. About 31 per cent of the present population of Virginia is negro; it is practically certain that the next census will show less than 30 per cent probably less than 25.

"We know that there are no more negroes coming into the state than are leaving if there are as many, so, unless something can be done to lower the death rate among the blacks, it must be merely a question of a few years when we shall have to readjust our working conditions, if not so drastically certainly as definitely as we were compelled to do after 1865."

A second study in the vital statistics concerns the dietary disease of pelagra.

The annual report has this to say about pellagra:

"In 1924 despite several lean years for agriculture, pellagra hit its low mark, having declined from 327 in 1918 to 75 in 1924, but from that time the rate has risen. There were 97 victims in 1925 and 114 in 1926. Since pellagra is a dietary disease, the registrar of vital statistics is justified when he asks in connection with the subject, 'can it be that the food habits of the people are going backward?' "

Health - 1927

Negro Health In City Improved 50 Per Cent Says Dr. P. S. Schenck

Longevity Has Increased About 15 Years—Infantile Death Rate Cut In Half—Declares Welfare Director

Va.

Health conditions all down the line in the Negro race in Norfolk have increased 50 per cent during the last decade. The longevity has increased about 15 years, the infantile death rate has been cut in half, the death rate from tuberculosis has reduced more than 50 per cent and the general death rate about half what it was ten years ago declares Dr. P. S. Schenck, director of public welfare, commenting on the health prospects of the colored citizens here in connection with the observance of Negro Health Week, April 3 to 10.

The general sanitation of colored homes has improved immensely and the race is taking a great deal of interest in their personal health as well as civic pride in improving public health conditions, says Dr. P. S. Schenck.

Our Good Health Showing

The brief inventory of health conditions among the colored population of this city as submitted by Dr. P. S. Schenck, director of public welfare, in an article in this paper, upon the observance of the thirteenth annual Negro Health Week, which includes April 3 to 10, is very encouraging. The improvement in our health and longevity in the past decade as pointed out by Dr. Schenck, reflects credit upon our group in convincing testimony to the gradual but positive results we are attaining in our aspirations to live better and longer. This improvement also stands as a very distinct credit to our department of public welfare, since in it is seen the evidence of the constant zeal this department is exercising in its effort to make Norfolk a healthier and happier city.

To increase in health conditions 50 per cent; to increase our longevity about 15 years; to have our infantile death rate cut in half and to have our tuberculosis death rate reduced by one half, or in fact to save from 600 to 800 lives annually, in a period of ten years as Dr. Schenck reports we have, is really a remarkable showing for our group here. The credit for this excellent showing goes to the increase of higher living standards among our group itself and to our health department, but the fact must not be overlooked that the city administration in general and the public at-large share abundantly in this credit. The improvement in our literacy status has been greatly enhanced by sympathetic encouragement from our city and the public, and the improvement of our health conditions cannot be separated from the general improvement in our literacy standards. Therefore, it is not alone a splendid showing for our group and for our health department, but for Norfolk city.

Here attention might be called to the very beneficial scrutiny the health department provides over our school children. Less informed parents often consider these health reports on their children coming from the school physicians and nurses irksome and troublesome. Parents cannot be too stringently cautioned regarding the importance that should be attached to these reports. Proper action upon them may save a life, or guard against much suffering to the child in later years. These reports should not be ignored. They are not written for the fun of it, but have a very distinct meaning to the parents receiving them. In fact, they constitute one of the finest contributions the city offers to its citizens, and ought to be thoroughly appreciated.

We have made a good showing in health and life improvement in Norfolk in the past decade, to which Dr. Schenck refers. Certainly every week ought to be Health Week, but we can make this particular week worth while in our individual lives and in the lives of our families by making some conspicuous contributions to health improvement. Let it be a visit to the family physician for a personal inventory, or let it be the taking of the suspected child to physician or the children's clinic, or it may a lesson in health to the family. Do some to make life healthier and sweeter for one' or dependents, and resolutely resolve to an even better health showing in the ne years than we have in the past

Virginia.

PRIZES OFFERED FOR ORIGINAL HEALTH POSTERS

Virginia T. B. Association Opens Competition To Public School Children

TIMES
ROANOKE, VA.

APR 8 1927

Richmond, April 12.—Prizes for original health posters are being offered by the Virginia Tuberculosis Association, and notices of the contest have been sent to local chairmen of that organization and to the superintendents of schools throughout the State.

The competition is open to white and colored children of the 4th, 5th and 6th grades of the public schools. The posters are to be judged by a committee of three to be appointed by the local chairmen for the counties or cities and all posters to be submitted must reach the committees for the country or city in which they are made by May 1st. The three best posters chosen by the local committee of judges will be forwarded to the Virginia Tuberculosis Association, 511 Atlantic Life Building, to reach that office by May 15th. The State judges will be appointed by the Association and announcements of awards will be made public about June 1st.

The first prize for the best poster submitted by pupils in schools of cities in Virginia of 50,000 or over is $25, and the same sum will be given for the best poster from pupils in rural schools or cities of less than 50,000 population. One second prize of $10 and one third prize of $5 will be offered for either country or city school children of the 4th, 5th and 6th grades.

TIMES
ROANOKE, VA

MAR 2 1927

D CLINICS R COLORED BABIES

Preliminaries for two or three clinics for colored babies here soon were discussed yesterday by Dr. C. B. Ransone city health officer, in talks to groups of colored women interested in school welfare work. One of the clinics will be for "well babies," with a view of promoting general health conditions, and the other will be in the nature of a pre-natal clinic.

Colored women of the city are each year manifesting a more absorbing interest in the health department's activities in connection with school work and in maintaining higher health standards. As a result palpable improvements in health conditions of local colored communities have been perceived and the health department has been greatly encouraged by the cooperation it has received.

Dr. Ransone plans to devote much time this week to plans for the clinics for colored babies. Nurses from the department of health will assist in the examinations.

TIMES
ROANOKE, VA.

APR 8 1927

MANY NEGRO CHILDREN RECEIVE TREATMENT

Local schools for colored children bested the white schools in competition for the highest percentage on number of pupils to have received toxin-antitoxin recently in the low first grades. The competition was confined to children who entered school in the term beginning in February. The colored schools registered 96.3 per cent in administration of the serum and the white schools 50 per cent.

Official figures on the average were announced yesterday by Dr. C. B. Ransone, city health officer, who administered the toxin-antitoxin to the children. The colored schools were far in the lead, official percentage figures showed. Gregory and Harrison avenue schools had a percentage of 100, while Gainsboro school recorded 86.6 per cent.

Melrose led the white schools with 68 per cent, or 17 out of its 25 pupils admitted to the low first in February. Belmont came next with 47 out of a total of 71, or 66.2 per cent. Monroe had 26 out of 41, or a percentage of 63.4.

Much interest was evinced by the children of the various schools in leading the others in the race for the highest percentage and health authorities are convinced that the enthusiasm will result in accomplishing a great deal toward reducing the number of cases of diphtheria among children here.

L, VA.

MAR 3 1927

Colored People to Have Diphtheria Clinic Friday

A clinic for the prevention of diphtheria among colored people will be held Friday morning at 10 o'clock at the Goodwill Community Center, 410 North Monroe street. The clinic will be under the auspices of the city health department.

VIRGINIAN-PILOT
NORFOLK, VA.

APR 10 1927

NEGRO MORTALITY EXCEEDS WHITES

Welfare Director Reviews Probable Causes In Annual Report To City

An interesting study of the local mortality rate and the probability of aged senility for each resident is afforded by vital statistics for 1926, compiled by Dr. L. J. Roper, director of the Department of Public Welfare, for the annual report of his department's activities.

A feature of the report is that one centennarian died last year, while of the total of 691 white and colored resident deaths, one white and one colored were between the ages of 80 and 90. Under one year and between 50 and 60 years were the periods of greatest mortality, 26 white and 2 colored babies dying before reaching their first anniversary and 47 white and 77 colored people dying between the ages of 50 and 60.

Due to many causes, not the least of which Dr. Roper believes to be insanitary living conditions and improper dieting, negro deaths were far in excess of white deaths, the total resident deaths being divided by race and sex as follows: One hundred and twenty-five white male and 134 white female making a total of 259 white deaths and 209 colored male and 223 colored female, making a total of 432. Negro deaths exceed white deaths for all of the age groups until 60 years is reached when the ratio is reversed permanently probably due to the fact that few colored people survive the exigencies of their existence to the Biblical span of threescore and ten.

Another feature of the 1926 statistics is that there were no white deaths between the ages of 15 and 20, while there were 22 colored deaths for the same age limit.

WINNERS IN T.B. POSTER CONTEST ARE ANNOUNCED

Only Norfolk And Roanoke Compete And Roanoke Wins The Prize

Special to Journal and Guide
Richmond, Va., May 31—The win-

ners in the health poster contest conducted in the schools by the Virginia Tuberculosis Association were announced today at the office of the Association in Richmond by the State Judges.

Only two cities competed, Norfolk and Roanoke. The prize of $25.00 for the best poster was awarded to Ethel Dotson, 6th grade, Lee Junior Annex School, Roanoke.

The first prize in the county contest went to Eugene Jones, 4th grade, Lochleven School, Lunenburg. The second and third prizes were awarded respectively to John Henderson, Route 1, Fredericksburk and Francis Holland, Rocky Mount.

Special mention were given the posters sent in by Mary Elizabeth Garrett and Helen McGhee, of Rocky Mount, Elizabeth Keith, of Willis and Josephine Painter, of Grovetown, Virginia. Of the twenty-four counties competing, Franklin County pupils received one prize and two honorable mentions.

The State judges were chosen from three fields, health, art and education, Dr. Mary E. Brydon, Director of the Bureau of Child Welfare, State Board of Health, Mr. Fred O. Siebel, the well known cartoonist of the Times Dispatch, and Dr. H. H. Hibbs Director of the School of Social Work and Public Health.

NEWPORT NEWS
VIRGINIA
JAN 21 1927

OPEN NATIONWIDE HEALTH CAMPAIGN

Dr. Scott, Local Colored Physician, Attends Meetings of Commission in Washington.

A comprehensive campaign to determine the causes for bad health conditions among members of the negro race and provision of means to remedy the conditions that exist throughout the United States will be undertaken by the National Commission on Negro health, according to Dr. PhillipA. Scott, colored, of this city, who returned yesterday from a meeting of the commission in Washington.

The commission consists of seven members, all prominent men in the negro race. The members of the commission, in addition to Dr. Scott, who is vice-chairman, are: Dr. William J. Tompkins, chairman, Kansas City, Mo.; Dr. Charles D. Fisher, executive secretary, Washington; Dr. A. B. Jackson, director, Washington; Charles Hall, statistician, Washington; Dr. John B. Hall, Boston, and Dr. Thomas T. Wendell, Lexington, Ky.

The commission will undertake a sweeping inquiry into the causes of existing conditions as regards general health conditions among negroes throughout the country, Dr. Scott stated, and will pay particular attention to the causes of the high infant mortality rate among colored people. In this particular, the commission will give special attention to stillbirths, and will seek a solution of that problem, which, according to Dr. Scott, is considered a serious one by prominent men of the race.

In its work the commission will get in touch with health officers throughout the United States and will get statistics and information upon which they may base their investigation. Infectious and contagious diseases, their prevalence and prevention, also will receive the attention of the commission.

Upon completion of the task of assembling the date sought, which Dr. Scott declared would take several years in the opinion of the commission, the body will with the data at hand, make recommendations that will be aimed at improving conditions in general and bringing the general health conditions of the colored race up to the highest possible standard.

SECOND BIG T. B. MASS MEETING IN PORTSMOUTH

A mammoth health mass meeting is set for the fourth Sunday, May 22, at Emanuel A. M. E. Church, Portsmouth, in continuing the fight on tuberculosis in this State. An effort is being made to raise at least $500.00 at this meeting which is to go toward a fund being raised to provide free beds for Portsmouth patients at Piedmont Sanatorium and other aid to local tubercular victim, who are without means. The meeting is called at the direction of Presiding Elder M. E. Davis, chairman of the health committee, who has led the crusade in this section instituted by the Negro Organization Society sometime ago to fight tuberculosis through enlarging the accommodations at the retreat at Burkeville.

This is the second appeal being made to the citizens of Portsmouth to pull together in this fight. The first was made at Zion Baptist Church several weeks ago and proved a success.

All of the churches, Sunday schools, choirs, fraternal organizations, social, musical, art clubs, teachers and all the public in general are called upon to unite in Portsmouth on this occasion and show their interest in this second big effort in the health building of the race. It is hoped and expected that all citizens and organizations will make a free will offering, individually and collectively to raise the amount sought, all of which will be used in the local fight on the white plague.

The funds are needed first to pay for one free bed for one of Portsmouth's indigent patients in the Sanatorium and the remainder for building and screening porches for any of Portsmouth's patients who are not able to have it done, and to furnish such ememgencies that are needed. Organizations are asked to come out in a body and have a representative to report a sum of money when the name of the organization is called.

The committee co-operating with Dr. Davis the chairman, is constituted of all the pastors, principals of schools and heads of organizations in the city.

The Proper Line of Attack On Our High Death Rate

Our group is constantly confronted with statistics, lectures and other evidences tending to show our death rate to be virtually double that of the whites. That we die relatively faster than the other race is a fact admitted in every quarter, but the mere repetition of this fact does not get us anywhere towards a remedy for the trouble. Those who have most to do with assembling this information and presenting it to us are the ones who could do most in their respective communities toward instituting remedial measures. The Negro's high disease and death rate is just a natural consequence of his low economic status, and the same would be true of any other group similarly circumstanced.

To get at this condition in a constructive way the attack must be centered on the living conditions of colored people. Health education is in itself a most necessary thing for longer life, but even that cannot be made to reach the roots of the condition until the earning power of those toward whom it is directed is such that they can avail themselves of it. To tell a poor father with a wife and five or six children what is best for his family's health is mere piffle unless what is suggested is something that is within his reach, or that can be turned to good effect by his individual efforts. In our own city the intellectual status of the masses of Negroes is now at a point where most of them understand the advantages of hygienic living, but their economic status is not at the point where they can turn their knowledge to actual benefit. A United States Government bureau has estimated approximately $2100 annually as the necessary income to provide a family of five persons with the ordiarily comforts of life. The average Negro family's income in the Southern cities is not more than $800 annually. Double standards of pay for white and colored workers are directly seflected in double standards of health.

Then, too, curbstones and gravestones have no little relation to each other. The Negro family generally has to live where there is a lack of the former and, of course, quickly gets the latter. Paved streets, proper sewerage, open air spaces, adequate hospitals, all of which are available to the poorest white family reflect their advantage in longevity and better health. When the colored people have more stones in front of their homes and yards and less stagnant mudholes, their use of gravestones will show a relative decline. Whenever this country's alleged democracy awakes and asser itself to the end that all workmen regardless of race will be worth their hire, Negro babies will live longer. It is all in the economic difference. It would be refreshing and encouraging indeed, if some of the scientific men, who are in the habit of getting at the roots of diseases, would address themselves to the basic causes of the high Negro death rate instead of spending so much time on the symptoms.

Tuberculosis Mass Meetings

The efforts that the Rev. M. E. Davis, chairman of the Health Committee of the Negro Organization Society, is making to arouse the colored citizens of Tidewater to the imperative need of enlarging the facilities at Piedmont Sanatorium, the only Negro tuberculosis hospital in the State and to the need of a more general oversight of colored tubercular victims in Virginia, deserve to meet with definite success. He, with cooperating committees of local pastors and school principals, is staging a series of mass meetings in this city and Portsmouth for the specific purpose of providing one or two free beds at the retreat for patients from these cities and for providing aid for known indigent tubercular patients in their homes. Dr. Davis, besides having to attend to his duties on his circuit as presiding elder, has launched this effort with a vigor. It is real humanitarian work and the response ought to be generous.

Health-1927

Virginia.

DECLARES MANY COLORED PEOPLE USE TOO MANY NAMES

Trouble And Loss Often Result In This Confusion, States Dr. Plecker

Richmond, Va., Dec. 13:—Dr. W. A. Plecker, State registrar of vital statistics, in a letter to the Journal and Guide, declares that the work of registering the births, deaths and marriages of many colored people is much hindered because of the custom of having two or more names. He cites specific instances of annoyance, trouble and even personal loss sustained by heirs of beneficiaries because of defective family records growing out of a confusion in names. In some cases, Dr. Plecker states, it has been found that one colored person will have two or three names, and he urges that to save possible trouble and loss all persons use only their legal names, and when they write their names do it always in the same way.

His letter states:

Dr. Plecker's Statement

"The State Bureau of Vital Statistics is much hindered in its work of correctly registering the births, deaths and marriages of many colored people because of the common custom of having two or more names.

"In the case of World War Soldiers who die, the deaths being registered under names different from those of enlistment, the widows find great difficulty in establishing the fact of death and securing the money to which they are entitled. The same occurs when children are recorded under one name and pass afterwards under another. When the parents come to secure the allotment allowed for the young children of soldiers, they are held up and frequently difficulty is found in securing the money.

"An illustration of this has just come before our Bureau in which a child when born was given his real father's name. When his mother married the second time this child was given the step-father's surname. He was afterwards taken by an aunt but not legally adopted and was given a third surname, that of the aunt. He enlisted in the World War under this, his third name. Later when sent to the penitentiary he changed his name again and died at the State Farm under that assumed name. His aunt found herself entirely unable to satisfy the Pension Office that the man who died as a convict was the one who enlisted under the name of his aunt.

Another Case

"In another case which we are now working on we find that a colored woman had a daughter born in Virginia in 1913, the mother being one of those who possessed two names. The family moved to New Jersey. Recently the Bureau of Vital Statistics received an urgent request for the certificate of this child's birth, the mother stating that the child had been brutally mistreated by two men and that the case when it comes into court would depend upon the child's age. She gave the name she has chosen for New Jersey, but it was not the same as the one she used in Virginia and under which her child was registered. After quite a search we located the certificate and sent her a certified copy of it. Knowing that she would have trouble we wrote the physician to know whether he had made a mistake. He wrote back that he had made an investigation and found that the mother went by two names. He made out a new certificate giving the name used in New Jersey. We hastily sent the mother a certified copy of the new certificate, asking her to return the old and offering her our services if we can assist further.

"This case illustrate the care used in our office to assist as far as we are able all who need our help, or who get themselves and others into trouble by their own stupidity in trying to go under more than one name.

Hundreds Of Such Cases

"We have had perhaps hundreds of such cases called to our attention, and feel reasonably sure that there are many thousand colored people in the State who do not seem even at this late day to be settled as to their names.

"In the list of 5,000 midwives kept in our office, we find many glaring instances of this condition. Many midwives use their married names sometimes and their maiden names at others, or they may use either of two married names when widows the second time. One was found to have three names.

"As I believe that your paper reaches many, I would suggest that you can aid in saving time from trouble and loss by urging all to use only their legal names, and when they write their names, do it always the same way.

"Untangling the problems produced by having two or more names is quite a job, and while our office does all it can to help when trouble is thus caused, we would rather prevent trouble by teaching the importance of this matter.

"Infants should be named when the births are reported, and if changed, notice should be sent to the Bureau of Vital Statistics, Richmond."

Too Many Names

The State Bureau of Vital Statistics under Dr. W. A. Plecker states that the work of registering correctly the births, deaths and marriages of many colored people is greatly hindered by their custom of having two or more names. In an article printed elsewhere in this paper instances of confusion and annoyance and even serious loss to heirs or beneficiaries arising out of changed or uncertain family names are illustrated.

What is there in a name? Very much indeed if it is the cognomen of an individual, or family; for it is the only thing which designates them from the millions of other individuals or families. In this day of complex civilization when virtually every move is made with some sort of legalities involved, one who carelessly changes his name or allows it to become changed thru the common usages of others is indeed shortsighted, if not downright foolish. When a person assumes a name different from that given and recorded at birth he, in so far as his physical designation among other human beings goes, passes out of his existence and begins to exist as another person without determinable family record or history. In fact, he merely springs into being, coming from nowhere, traceable back to nowhere and without a family history to pass on to anybody.

Sentimental considerations aside, however, it is very important for practical reasons that every person exercise due regard for the fixibility of his name. Especial care should be taken in respect to having the names of infants appear correctly on their birth certificates and people in whose care might come the rearing of orphans or adopted children should record with the proper authorities any change of name of those taken in their charge. Claims, titles, legacies and benefactions of various kinds are often defeated because of the inability of those meriting them to trace their family records.

Dr. Plecker renders a public service when he calls attention to the seriousness of this matter of people carelessly changing their names, and it is a practice that every one should guard against.

Health - 1927

West Virginia.

WEST VIRGINIAN
FAIRMONT, W. VA.

APR 26 19

SUMMERS CO. NEGROS FORM T B ASSOCIATION.

HINTON, April 26 (By the Associated Press).—A negro tuberculosis association for Summers County, the first of its kind in West Virginia, was organized here Saturday with Dr. C. H. Laws, president. The organization grew out of negro health week which was held here.

The association formed under direction of Miss Hascock, state health nurse, assisted by Dr. Crichlow of state sanitarium for negro tubercular patients at Den nar.

Health -1927

Wisconsin.

Milwaukee Urban League Starts Drive on "T. B."

Milwaukee, Wis., Feb. 18.—An intensive campaign to check tuberculosis among the Negroes here got under way with the chest clinic, conducted by the Wisconsin Anti-Tuberculosis association, Jan. 30 and 31, at the headquarters of the Milwaukee Urban league, 531 Vliet St. The clinic was held at the request of J. H. Kerns, executive secretary of the Urban league, who has just completed a survey of tuberculosis here since the beginning of the great war. This survey shows that the tuberculosis and pneumonia deaths were much higher in this group than in other groups and he believes that a strenuous effort must be made to check further ravages.

JOURNAL
MILWAUKEE, WIS.

APR 7 1927

Good Health Minstrel to Entertain Negroes

The modernized Punch and Judy show, "Know-Naught," and the showing of health films will feature the health programs Thursday and Friday evenings in connection with this week's observance of Negro Health week under the auspices of the Milwaukee Urban league. Thursday at 7 p. m. the Wisconsin Anti-Tuberculosis association's good health minstrel, "Cheerio From Laughterland," will entertain an audience at St. Benedict the Moor's mission. Health films will be shown by Jacob Van Kooy, of the W. A. T. A. staff. Friday evening at the Fourth Street school a meeting of school children

SENTINEL
MILWAUKEE, WIS.

AUG 19 1927

Negro Deaths in City Exceed Birth Rate

Something's wrong in the "colored quarter." Last year there were 130 pickaninnies born. That in itself is fine, but the statistics on births and deaths in Milwaukee for 1926 show that 148 negroes died, eighteen more than were born. Compared with birth and death statistics of white people in Milwaukee, the negro mortality is extremely high. In 1926 there were 11,897 white babies born, while deaths numbered 5,646, which figure isn't even half of the birth rate.

SENTINEL
MILWAUKEE, WIS.

NOV 27 1927

Urban League Aids Health of Negroes

Health work among the negro population of Milwaukee received a large share of attention of the Milwaukee Urban league, it is disclosed by the annual report.

The child welfare clinic, meeting once a week, treated 465 children. Addresses and lectures on health topics were heard by 2,500 persons during negro health week, 2,000 pieces of health literature were distributed, and 161 persons were examined in a two day chest clinic.